2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2009
Secretary of State

DOCUMENT# N98000001192

Entity Name: CANTONMENT ROTARY CLUB FOUNDATION, INC.

Current Principal Place of Business:

6251LAKE CHARLENE DRIVE
PENSACOLA, FL 32506

New Principal Place of Business:

Current Mailing Address:

6251 LAKE CHARLENE DRIVE
PENSACOLA, FL 32506

New Mailing Address:

6251LAKE CHARLENE DRIVE
PENSACOLA, FL 32506

FEI Number: 59-3497386 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BOYWID, EDWARD T
6251 LAKE CHARLENE DRIVE
PENSACOLA, FL 32506 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DS ( ) Delete
Name: GORMAN, RICK
Address: 513 TURNBERRY ROAD
City-St-Zip: CANTONMENT, FL 32533

Title: VD ( ) Delete
Name: WALK, JONES
Address: 10615 MAC GREGOR DR
City-St-Zip: PENSACOLA, FL 32514

Title: VD ( ) Delete
Name: THOMAS, CHARLES
Address: 960 RIDGEWAY
City-St-Zip: CANTONMENT, FL 32533

Title: PD ( ) Delete
Name: WESTLAKE, JANET
Address: 694 CANDY LANE
City-St-Zip: CANTONMENT, FL 32533

Title: TD ( ) Delete
Name: BOBBY, KING
Address: 1205 WEST GREGORY
City-St-Zip: PENSACOLA, FL 32501

Title: D ( ) Delete
Name: BOYWID, EDWARD T
Address: 6251 LAKE CHARLENE DRIVE
City-St-Zip: PENSACOLA, FL 32506

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change ( ) Addition
Name: DICKERSON, CARL
Address: 1501 MUIRFIELD ROAD
City-St-Zip: CANTONMENT, FL 32533

Title: PD (X) Change ( ) Addition
Name: WALK, JONES
Address: 10615 MAC GREGOR DR
City-St-Zip: PENSACOLA, FL 32514

Title: PED (X) Change ( ) Addition
Name: THOMAS, CHARLES
Address: 960 RIDGEWAY
City-St-Zip: CANTONMENT, FL 32533

Title: SD (X) Change ( ) Addition
Name: WESTLAKE, JANET
Address: 694 CANDY LANE
City-St-Zip: CANTONMENT, FL 32533

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDWARD T. BOYWID D 01/31/2009

Electronic Signature of Signing Officer or Director — Date