2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001682

FILED May 16, 2007 Secretary of State

Entity Name: ROTARY CLUB OF HOMESTEAD CHARITABLE FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

15600 SW 288TH ST 15600 SW 288TH ST

STE 401 STE 403

HOMESTEAD, FL 33030 HOMESTEAD, FL 33033 US

Current Mailing Address: New Mailing Address:

15600 SW 288TH ST P.O. BOX 901215

STE 401 HOMESTEAD, FL 33090-215 US HOMESTEAD, FL 33090-215 US

FEI Number: 65-0823452 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GUESTN, JAMES M CPA

PASTRAN, DEBORAH K ESQ
15600 SW 288TH ST, STE 401

333 NE 8 STREET

HOMEOTEAR EL 20020 LIG

HOMESTEAD, FL 33030 US HOMESTEAD, FL 33030 US

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: DEBORAH KAICHER PASTRAN 05/16/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: P () Delete Title: D (X) Change () Addition

 Name:
 TIETIG, ERIK
 Name:
 TIETIG, ERIK

 Address:
 16300 SW 184 ST
 Address:
 16300 SW 184 ST

 City-St-Zip:
 MIAMI, FL 33187
 City-St-Zip:
 MIAMI, FL 33187

Title: PE () Delete Title: P (X) Change () Addition

 Name:
 JONES, MARGARET B
 Name:
 JONES, MARGARET B

 Address:
 1788 N KROME AVE
 Address:
 1788 N KROME AVE

 City-St-Zip:
 HOMESTEAD, FL 33030
 City-St-Zip:
 HOMESTEAD, FL 33030

Title: S () Delete Title: PELE (X) Change () Addition

 Name:
 SCHRAMM, THOMAS
 Name:
 SCHRAMM, THOMAS

 Address:
 160 NW 13TH ST
 Address:
 160 NW 13TH ST

City-St-Zip: HOMESTEAD, FL 33030 City-St-Zip: HOMESTEAD, FL 33030 US

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$

Name: RICHARDSON, MICHAEL
Address: 43 N. KROME AVE

RICHARDSON, MICHAEL
Address: 43 N. KROME AVE

Address: 43 N. KROME AVE

City-St-Zip: HOMESTEAD, FL 33030 City-St-Zip: HOMESTEAD, FL 33030 US

 $\label{eq:title:title:title:S} \textit{Title:} \qquad \textit{S} \qquad \textit{(X) Change () Addition}$

 Name:
 STEVENS, CHARLES
 Name:
 HELMS, JENNIFER

 Address:
 437 N. KROME AVE
 Address:
 166 NW 19 STREET

 City-St-Zip:
 HOMESTEAD, FL 33030
 City-St-Zip:
 HOMESTEAD, FL 33030 US

Title: T () Delete Title: T (X) Change () Addition

Name: THIBAULT, WILLIAM Name: BROUWER, DAVID
Address: 690 N HOMESTEAD BLVD Address: 15600 SW 288 STREET, SUITE 403

City-St-Zip: HOMESTEAD, FL 33030 City-St-Zip: HOMESTEAD, FL 33033

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: DAVID BROUWER T 05/16/2007