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Apr 08 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N45537 (0)

1. Corporation Name

ROTARY CLUB OF VERO BEACH SUNRISE, INC.



Principal Place of Business

Mailing Address

P.O. BOX 6274
VERO BEACH FL 32961

P.O. BOX 6274
VERO BEACH FL 32961-6274

3. Date Incorporated or Qualified
10/09/1991

3a. Date of Last Report
04/18/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

4. FEI Number

65-0105200

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RENNINGER, FRED W., JR.
136 11TH COURT
VERO BEACH FL 32962

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME LOWTHER, TOM
STREET ADDRESS P.O. BOX 6274 N/A
CITY-ST-ZIP VERO BEACH FL

☐ DELETE

TITLE D
NAME REDSTONE, PAUL
STREET ADDRESS P.O. BOX 6274 N/A
CITY-ST-ZIP VERO BEACH FL

☒ DELETE

TITLE D
NAME LABADIE, LARRY
STREET ADDRESS P.O. BOX 6274 N/A
CITY-ST-ZIP VERO BEACH FL

☐ DELETE

TITLE PD
NAME CUSSON, JOHN
STREET ADDRESS PO BOX 6274 N/A
CITY-ST-ZIP VERO BEACH FL 32961

☐ DELETE

TITLE DT
NAME RENNINGER, FRED
STREET ADDRESS P. O. BOX 6274 N/A
CITY-ST-ZIP VERO BEACH FL 32961

☐ DELETE

TITLE PD
NAME CAPECE, PETE
STREET ADDRESS P. O. BOX 6274 N/A
CITY-ST-ZIP VERO BEACH FL 32961

☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

D JOHN ROGERS
PO BOX 6274 N/A
VERO BEACH, FL 32961

☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

DS FRANK SOSTA
PO BOX 6274 N/A
VERO BEACH, FL 32961

☒ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 42 or Block 13 in changed, or on an attachment with an address.

CR2E037 (9/96)