2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719554

Entity Name: ROTARY CLUB OF BROOKSVILLE, INC.

Entity Name. NOTANT CLOB OF BROOKSVILLE, II

Current Principal Place of Business:

4287 BELLAIRE DRIVE SPRING HILL. FL 34607

Current Mailing Address:

POST OFFICE BOX 701 BROOKSVILLE. FL 34601 US

FEI Number: 59-6209583 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NICOLAI, KAREN 4287 BELLAIRE DR SPRINGHILL, FL 34607 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:

Electronic Signature of Registered Agent

Date

FILED Mar 09, 2016

Secretary of State

CC9119402382

Officer/Director Detail:

Title S Title

NameTRUMP, RICHARDNameNICOLAI, KARENAddress26262 LAKE LINDSEY RDAddress4287 BELLAIRE DRIVECity-State-Zip:BROOKSVILLE FLCity-State-Zip:HERNANDO BEACH FL

Title PAST PRESIDENT Title PRESIDENT

Name CARPINONE, KAREN Name ROUHANA, LAUREN

Address 9040 BRUSH LANE Address 17323 BLOOMING FIELDS DRIVE

City-State-Zip: HUDSON FL 34669 City-State-Zip: LAND O LAKES FL 34636

Title DIRECTOR Title DIRECTOR

NameSCAVUZZO, CHRISNameJOHNSON, APRILAddress4070 GULF COAST DR.Address8384 VALMORA ST.

City-State-Zip: HERNANDO BEACH FL 34607 City-State-Zip: SPRING HILL FL 34608

TitleDIRECTORTitleSERGEANT AT ARMSNameVANFOSSEN, LARRYNameHAMMETT, JANINE

Address 3483 CULBREAETH RD Address 4662 LARKENHEATH DRIVE
City-State-Zip: BROOKSVILLE FL 34602 City-State-Zip: SPRING HILL FL 34609

Continues on page 2

I hereby 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 all other like empowered.

SIGNATURE: KAREN NICOLAI TREASURER 03/09/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title FOUNDATION CHAIR
Name VAN SICKLE, KAREN

Address 6388 GLENCHESTER DRIVE

City-State-Zip: WEBSTER FL 33597