

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000000278

**FILED  
Jan 12, 2015  
Secretary of State  
CC2424129977**

**Entity Name:** THE ROTARY CLUB OF PONTE VEDRA BEACH SUNSET, INC.

**Current Principal Place of Business:**

818 HWY A1A N, SUITE 206  
PONTE VEDRA BCH, FL 32082

**Current Mailing Address:**

P.O.BOX 612  
PONTE VEDRA BCH, FL 32004 US

**FEI Number: 20-1675015**

**Certificate of Status Desired: No**

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

MAURER, CAROL SECR.  
624 PALMERA DRIVE EAST  
PONTE VEDRA BEACH, FL 32082 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

**Officer/Director Detail :**

Title            PRESIDENT  
Name            MOTT, RONALD  
Address        P.O.BOX 612  
City-State-Zip: PONTE VEDRA BCH FL 32004

Title            TREA  
Name            MENCKE, JOHN TREA.  
Address        P.O.BOX 612  
City-State-Zip: PONTE VEDRA BCH FL 32004

Title            PE  
Name            BROWN, ANGELA  
Address        P.O. BOX 612  
City-State-Zip: PONTE VEDRA BCH FL 32004

Title            SECY  
Name            MAURER, CAROL SECR  
Address        P.O. BOX 612  
City-State-Zip: PONTE VEDRA BEACH FL 32004

Title            PP  
Name            HART, JEFFREY PP  
Address        P.O. BOX 612  
City-State-Zip: PONTE VEDRA BEACH FL 32004

*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: CAROL MAURER**

**SECRETARY**

**01/12/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date