

**2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL
REPORT**

DOCUMENT# N05000011262

Entity Name: ROTARY YOUTH EXCHANGE FLORIDA, INC.

Current Principal Place of Business:

141 ELMWOOD DRIVE
JACKSONVILLE, FL 32259

Current Mailing Address:

141 ELMWOOD DRIVE
JACKSONVILLE, FL 32259 US

FEI Number: 20-3739044

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KALTER, AL
141 ELMWOOD DRIVE
JACKSONVILLE, FL 32259 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: AL KALTER

07/13/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name GRINNEN, TRACY
Address 627 EAST NEW YORK AVENUE
City-State-Zip: ORANGE CITY FL 32763

Title CHAIRMAN
Name KALTER, AL
Address 141 ELMWOOD DRIVE
City-State-Zip: JACKSONVILLE FL 32259

Title VC
Name MOUNTFORD, DAVID W.
Address 7820 BANYAN TERRACE
City-State-Zip: TAMARAC FL 33321

Title TREASURER
Name WITCHER, TERRELL
Address 2953 W. CYPRESS CREEK RD.
STE 200
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR
Name MANYAK, TERRELL
Address 9691 NW 39TH COURT
City-State-Zip: COOPER CITY FL 33024

Title DIRECTOR
Name MICK, JAMIE
Address 13232 OLD FLORIDA CIRCLE
City-State-Zip: HUDSON FL 34669

Title DIRECTOR
Name MOYERS, CASSANDRA
Address 1128 RIVER BIRCH RD.
City-State-Zip: SAINT JOHNS FL 32259

Title DIRECTOR
Name NELSON, DAN
Address 3202 LAKESHORE DRIVE
City-State-Zip: TALLAHASSEE FL 32312

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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: AL KALTER

CHAIRMAN

07/13/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	PARKS, MICHAEL
Address	745 WINDSOR PKWY
City-State-Zip:	ATLANTA GA 30342