

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000009201

**Entity Name:** ROTARY LEADERSHIP INSTITUTE - SUNSHINE DIVISION, INC.

**FILED**  
**Apr 20, 2020**  
**Secretary of State**  
**5224298827CC**

**Current Principal Place of Business:**

8200 SEMINOLE BLVD  
SEMINOLE, FL 33772

**Current Mailing Address:**

8200 SEMINOLE BLVD  
SEMINOLE, FL 33772 US

**FEI Number: 20-5693670**

**Certificate of Status Desired: No**

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

SCHULER, TIMOTHY C  
8200 SEMINOLE BLVD  
SEMINOLE, FL 33772 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 CHIEF ADMINISTRATIVE OFFICER  
Name WENDT, BRENDA  
Address 7790 WEST OLYMPIA STREET  
City-State-Zip: HERNANDO FL 34442

Title CHAIR ELECT, VP  
Name CAUTERO, VINCENT A  
Address 161 SE 23RD STREET  
City-State-Zip: CAPE CORAL FL 33880

Title GENERAL COUNSEL  
Name SCHULER, TIMOTHY C  
Address 8200 SEMINOLE BLVD  
City-State-Zip: SEMIOLE FL 33772

Title CHAIR, PRESIDENT  
Name KERSEY, MARJORIE W  
Address P O BOX 464381  
City-State-Zip: LAWRENCEVILLE GA 30042

*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: TIMOTHY C SCHULER**

**GENERAL COUNSEL**

**04/20/2020**

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

\_\_\_\_\_  
Date