

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

DOCUMENT# N07000011449

**FILED**  
**Mar 25, 2015**  
**Secretary of State**  
**CC8627485861**

**Entity Name:** ROTARY CLUB OF CAPE CORAL GOLDCOAST,  
INCORPORATED

**Current Principal Place of Business:**

C/O ROBERT KNIGHT  
P. O. BOX 100175  
CAPE CORAL, FL 33910-0175

**Current Mailing Address:**

P. O. BOX 100175  
CAPE CORAL, FL 33910-0175 US

**FEI Number: 59-2564232**

**Certificate of Status Desired: No**

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

MUSIAL, LISA A  
923 DEL PRADO BLVD S.  
SUITE 207  
CAPE CORAL, FL 33990 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            AHMADI, KEVIN  
Address        P. O. BOX  
City-State-Zip: CAPE CORAL FL 33910-0175

Title            PRESIDENT ELECT  
Name            ZSEBE, DYLAN  
Address        P. O. BOX 100175  
City-State-Zip: CAPE CORAL FL 33910-0175

Title            SECRETARY  
Name            PRUITT, ANGELA  
Address        P. O. BOX 100175  
City-State-Zip: CAPE CORAL FL 33910-0175

Title            TREASURER  
Name            GOMES, FERNANDO  
Address        P. O. BOX 100175  
City-State-Zip: CAPE CORAL FL 33910-0175

*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: KEVIN AHMADI**

**PRESIDENT**

**03/25/2015**

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

\_\_\_\_\_  
Date