2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000006908

Entity Name: ROTARY CLUB OF THE VILLAGES - EVENING, INC.

FILED Mar 06, 2018 **Secretary of State** CC8416211390

Current Principal Place of Business:

4103 SE 10 AVE OCALA, FL 34480

Current Mailing Address:

P.O. BOX 1509

LADY LAKE. FL 32158 US

FEI Number: 45-4908217 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOSITO, JAMIE 4103 SE 10 AVE OCALA, FL 34480 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	TREASURER	Title	DIRECTOR
Name	IBERER, CAROLE	Name	REED, THOMAS
Address	2900 BONIFAY PATH	Address	1384 CHATEAU WAY
City-State-Zip:	THE VILLAGES FL 32163	City-State-Zip:	THE VILLAGES FL 32162

Title **PRESIDENT** Title DIRECTOR Name LOSITO, JAMIE JOHNSON, CLAUS Name

Address 4103 SE 10TH AVENUE Address 8335 SE 162ND ST City-State-Zip: OCALA FL 34480 City-State-Zip: SUMMERFIELD FL 34491

SECRETARY Title Title **PELECT**

Name ASHWORTH, MARY ANNE TREAT. CARLTON Name

Address 1304 BAEZ WAY Address 2150 BLACKVILLE DR.

City-State-Zip: THE VILLAGES FL 32162 THE VILLAGES FL 32162 City-State-Zip:

Title DIRECTOR Title DIRECTOR

Name BODENNER, SUE WEISS, HERMANN Name 1807 ESTEFANA WAY Address 17513 SE 88TH COVINGTON CIRCLE Address City-State-Zip: THE VILLAGES FL 32159

City-State-Zip: THE VILLAGES FL 32162

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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.

03/06/2018 SIGNATURE: JAMIE LOSITO **PRESIDENT**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name RHODES, ROBERT Name CRONENBERG, PATRICIA

Address 1501 BAYLER PLACE Address 533 KILMER WAY

City-State-Zip: THE VILLAGES FL 32162 City-State-Zip: THE VILLAGES FL 32162