2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000002944

Entity Name: ROTARY CLUB OF ST. AUGUSTINE, INC.

FILED Apr 29, 2019 Secretary of State 7657777838CC

Current Principal Place of Business:

1301 PLANTATION ISLAND DR STE 205A

ST. AUGUSTINE, FL 32080

Current Mailing Address:

PO BOX 3927

ST. AUGUSTINE FL 32085

FEI Number: 59-6152293 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ANDERSON, LOUISE H 1301 PLANTATION ISLAND DR STE 205A ST. AUGUSTINE FL 32080 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: LOUISE H ANDERSON 04/29/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

205A

Title DIRECTOR Title VP

Name BATENHORST, KATHERINE Name KOTRADY-HATIN, JODI

Address 1301 PLANTATION ISLAND DR Address 1301 PLANTATION ISLAND DR STE

205A

City-State-Zip: ST. AUGUSTINE FL 32080 City-State-Zip: ST. AUGUSTINE FL 32080

Title PRESIDENT Title TREASURER

Name CRUM, BOBBY Name CRUM, REBECCA

Address 1301 PLANTATION ISLAND DR Address 1301 PLANTATION ISLAND DR

205A

City-State-Zip: ST. AUGUSTINE FL 32080 City-State-Zip: ST. AUGUSTINE FL 32080

Title DIRECTOR Title SECRETARY

Name GACHET, PEGGY Name HILBERT, DANIEL

Address 1301 PLANTATION ISLAND DR STE Address 1301 PLANTATION ISLAND DR

205A 205A

City-State-Zip: ST. AUGUSTINE FL 32080 City-State-Zip: ST AUGUSTINE FL 32080

Title DIRECTOR Title DIRECTOR

Name HAUPT, CHARLIE Name MISTERLY, GRANT

Address 1301 PLANTATION ISLAND DR STE Address 1301 PLANTATION ISLAND DR STE

205A 205A

City-State-Zip: ST. AUGUSTINE FL 32080 City-State-Zip: ST. AUGUSTINE FL 32080

Continues on page 2

205A

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: BOBBY CRUM PRES 04/29/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

DIRECTOR

City-State-Zip: ST. AUGUSTINE FL 32080

PARKER, SUSAN

Title

Name

Title DIRECTOR Title DIRECTOR

Name LONGO, MEL Name NELSON, MELISSA

Address 1301 PLANTATION ISLAND DR STE 205A Address 1301 PLANTATION ISLAND DR STE

205A

City-State-Zip: ST. AUGUSTINE FL 32080

City-State-Zip: ST. AUGUSTINE FL 32080

Title DIRECTOR

Address 1301 PLANTATION ISLAND DR STE 205A Name NUSBAUM, CECILE

Address 1301 PLANTATION ISLAND DR STE 205A Address 1301 PLANTATION ISLAND DR STE

205A

City-State-Zip: ST. AUGUSTINE FL 32080