

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000002944

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

04/27/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name BATENHORST, KATHERINE
Address 1301 PLANTATION ISLAND DR
205A
City-State-Zip: ST. AUGUSTINE FL 32080

Title DIRECTOR
Name KOVACS, KYLE
Address 1301 PLANTATION ISLAND DR
205A
City-State-Zip: ST. AUGUSTINE FL 32080

Title PRESIDENT
Name KOTRADY-HATIN, JODI
Address 1301 PLANTATION ISLAND DR STE
205A
City-State-Zip: ST. AUGUSTINE FL 32080

Title DIRECTOR
Name CRUM, BOBBY
Address 1301 PLANTATION ISLAND DR
205A
City-State-Zip: ST. AUGUSTINE FL 32080

Title TREASURER
Name CRUM, REBECCA
Address 1301 PLANTATION ISLAND DR
205A
City-State-Zip: ST. AUGUSTINE FL 32080

Title SECRETARY
Name GACHET, PEGGY
Address 1301 PLANTATION ISLAND DR STE
205A
City-State-Zip: ST. AUGUSTINE FL 32080

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: LOUISE H. ANDERSON

RA

04/27/2018

Electronic Signature of Signing Officer/Director Detail

Date