

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45537

Entity Name: ROTARY CLUB OF VERO BEACH SUNRISE, INC.**Current Principal Place of Business:**3333 20TH ST
VERO BEACH, FL 32960**Current Mailing Address:**P.O. BOX 6274
VERO BEACH, FL 32961**FEI Number:** 65-0105200**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VOCELLE, LOUIS
3333 20TH ST
VERO BEACH, FL 32960 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:** LOUIS B. VOCELLE, JR.

01/23/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name VORCE, CHRISTINA
Address P.O. BOX 6274
City-State-Zip: VERO BEACH FL 32961

Title DIRECTOR
Name BURTON, JANE P.
Address P.O. BOX 6274
City-State-Zip: VERO BEACH FL 32961

Title DIRECTOR
Name PELENSKY, ROBIN
Address P.O. BOX 6274
City-State-Zip: VERO BEACH FL 32961

Title PRESIDENT
Name GIESSERT, RICHARD
Address P.O. BOX 6274
City-State-Zip: VERO BEACH FL 32961

Title VP
Name LEWIS, MARTIN
Address P.O. BOX 6274
City-State-Zip: VERO BEACH FL 32961

Title SECRETARY
Name STEINKRAUSS, CHRISTINE
Address P.O. BOX 6274
City-State-Zip: VERO BEACH FL 32961

Title DIRECTOR
Name FYKES, JASON
Address P.O. BOX 6274
City-State-Zip: VERO BEACH FL 32961

Title DIRECTOR
Name KENNEDY, LAURA
Address P.O. BOX 6274
City-State-Zip: VERO BEACH FL 32961

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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.

SIGNATURE: CHRISTINA VORCE

TREASURER

01/23/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name O'DONNELL, PAMELA
Address P.O. BOX 6274
City-State-Zip: VERO BEACH FL 32961

Title DIRECTOR
Name SCHLITT, TERENCE
Address P.O. BOX 6274
City-State-Zip: VERO BEACH FL 32961