

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001192

Entity Name: CANTONMENT ROTARY CLUB FOUNDATION, INC.**Current Principal Place of Business:**6251LAKE CHARLENE DRIVE
PENSACOLA, FL 32506**Current Mailing Address:**6251LAKE CHARLENE DRIVE
PENSACOLA, FL 32506**FEI Number: 59-3497386****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**BOYWID, EDWARD T
6251 LAKE CHARLENE DRIVE
PENSACOLA, FL 32506 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	PAST-PRESIDENT
Name	EVANS, JEREMY
Address	1175 WENSEL DR.
City-State-Zip:	CANTONMENT FL 32533

Title	PRESIDENT
Name	NIXON, DAVID
Address	4680 LANETT DRIVE
City-State-Zip:	PENSACOLA FL 32526

Title	DIRECTOR
Name	BOYWID, EDWARD T
Address	6251 LAKE CHARLENE DRIVE
City-State-Zip:	PENSACOLA FL 32506

Title	TREASURER
Name	HOWELL, KEVIN
Address	1425 TWILIGHT DR.
City-State-Zip:	CANTONMENT FL 32533

Title	VP
Name	ENGLAND, CATHY
Address	COULTER AVE.
City-State-Zip:	CANTONMENT FL 32533

Title	SECRETARY
Name	BYERS, ANGELIA
Address	208 DWIGHT AVE.
City-State-Zip:	PENSACOLA FL 32507

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: EDWARD T. BOYWID**DIRECTOR****01/30/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date