2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704814

Apr 24, 2007 Secretary of State

Entity Name: ROTARY CLUB OF SEMINOLE, FLORIDA, INCORPORATED

Current Principal Place of Business: New Principal Place of Business:

9001 134TH WAY NORTH SEMINOLE, FL 33776

Current Mailing Address: New Mailing Address:

P.O. BOX 3313

SEMINOLE, FL 33775 US

FEI Number: 59-6209572 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ELIAS, JOHN M. 611 DRUID ROAD EAST STE. 512 CLEARWATER, FL 33756 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:

Name:

Date

Electronic Signature of Registered Agent

() Delete

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

(X) Change () Addition

COLLIER, TERRY JONES, EVA Name:

5230 DENVER ST., NE Address: 10964 VILLAGE GREEN AVE Address: City-St-Zip: ST PETERSBURG, FL 33703 City-St-Zip: SEMINOLE, FL 33772

Title: DV () Delete Title: (X) Change () Addition

MALLORY, ROBIN Name: MALLORY, ROBIN Name: Address: 10596 NINA STREET Address: 10596 NINA STREET City-St-Zip: SEMINOLE, FL 33778 City-St-Zip: SEMINOLE, FL 33778

Title: () Delete Title: () Change () Addition

STEPHENSON, AL Name: Name: 9001 134TH WAY NORTH Address: Address: City-St-Zip: SEMINOLE, FL 33776 US City-St-Zip:

() Delete Title: DT Title: () Change () Addition

Name: MARTINOVICH, JOHN Name: Address: 10526 118TH ST., NORTH Address: City-St-Zip: LARGO, FL 33773 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOHN MARTINOVICH DT 04/24/2007