2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2000 8:00 am
Secretary of State
04-11-2000 90028 025 ****61.25

DOCUMENT # 706552

1. Entity Name

ROTARY CLUB OF SOUTH JACKSONVILLE, FLORIDA, INC.

Principal Place of Business	Mailing Address
P.O. BOX 47546 JACKSONVILLE FL 32247	P.O. BOX 47546 JACKSONVILLE FL 32247-7546

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-0734082 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

KEITH, SCOTT P
3946 W. CATTAIL POND CIR
JACKSONVILLE FL 32224

7. Name and Address of New Registered Agent

Name: Mayo Mills
Street Address (P.O. Box Number is Not Acceptable): 50 N. Laura St. #3700
City: Jacksonville FL Zip Code: 32202

8. 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: Mayo Mills, Secretary — 4-4-00
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) — DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD MILLS, MAYO P O BOX 47546 N/A JACKSONVILLE FL 32247	☒ Delete	President - D Ken Weiss PO Box 47546 Jax, FL 32247	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PED WEISS, KEN P.O. BOX 47546 N/A JACKSONVILLE FL 32247	☒ Delete	Vice President - D Scott P. Keith PO Box 47546 Jax, FL 32247	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD EDWARDS, JEFF P.O. BOX 47546 N/A JACKSONVILLE FL 32247	☒ Delete	Secretary - D mayo mills PO Box 47546 Jax, FL 32247	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD KEITH, SCOTT P.O. BOX 47546 N/A JACKSONVILLE FL 32247	☒ Delete	Treasurer - D Susan Schondelmaier PO Box 47546 Jax, FL 32247	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD DARRAGH, MIKE P.O. BOX 47546 N/A JACKSONVILLE FL 32247	☒ Delete	President-Elect - D Jeff Edwards PO Box 47546 Jax, FL 32247	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	BMD SCHONDELMAIER, SUSAN P.O. BOX 47546 N/A JACKSONVILLE FL 32247	☒ Delete	Board member - D Dale Malloy PO Box 47546 Jax, FL 32247	☒ Change	☐ Addition

CR2E037 (9/99)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED — 4-4-00 — (904) 396-4105
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #