2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2004
Secretary of State

DOCUMENT# 714223

Entity Name: NICEVILLE-VALPARAISO ROTARY CLUB, INC.

Current Principal Place of Business:

107 JUNIPER ST.
NICEVILLE, FL 32578 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 388
P.O. BOX 388
NICEVILLE, FL 32588 US

New Mailing Address:

FEI Number: 59-6153587 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HERNDON, D. TIMOTHY
4502 A HWY. 20
NICEVILLE, FL 32578 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: BURGER, LISA
Address: 4451 WOODBRIDGE RD.
City-St-Zip: NICEVILLE, FL 32578

Title: TD ( ) Delete
Name: SLOAN, LILLY J
Address: 220 YACHT CLUB DR.
City-St-Zip: NICEVILLE, FL 32578

Title: SD ( ) Delete
Name: SIMS, SANDY
Address: 1057E JOHN SIMS PKWY.
City-St-Zip: NICEVILLE, FL 32578

Title: PD ( ) Delete
Name: SKINNER, LOUIS D
Address: 17 BLUEWATER POINT ROAD
City-St-Zip: NICEVILLE, FL 32578

Title: VD ( ) Delete
Name: DANIELS, SHIRLEY
Address: 1001 E JOHN SIMS PARKWAY
City-St-Zip: NICEVILLE, FL 32578

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change ( ) Addition
Name: BURGER, LISA
Address: 4451 WOODBRIDGE RD.
City-St-Zip: NICEVILLE, FL 32578

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change ( ) Addition
Name: KONSHOK, DAVID
Address: 615 ST MARTIN COVE
City-St-Zip: NICEVILLE, FL 32578

Title: D (X) Change ( ) Addition
Name: SUMMERLIN, SCOTT
Address: 5 COOLWATER LN
City-St-Zip: NICEVILLE, FL 32578

Title: PD (X) Change ( ) Addition
Name: DANIELS, SHIRLEY
Address: 1001 E JOHN SIMS PARKWAY
City-St-Zip: NICEVILLE, FL 32578

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LILLY JOHNECE SLOAN TD 03/02/2004

Electronic Signature of Signing Officer or Director — Date