2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#717852

Entity Name: ROTARY CLUB OF NAPLES, INC.

FILED Jan 12, 2009 Secretary of State

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

6200 SHIRLEY ST. 2375 TAMIAMI TRAIL NORTH

#206 SUITE 110

NAPLES, FL 34109 NAPLES, FL 34103

Current Mailing Address: New Mailing Address:

P.O. BOX 812 NAPLES, FL 34106

FEI Number: 59-6152305 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

HACKNEY II, AL
599 TAMIAMI TRAIL NORTH
SUITE 311

GUSTASON, RONALD W
2375 TAMIAMI TRAIL NORTH
SUITE 110

SUITE 311 SUITE 110 NAPLES, FL 34102 US NAPLES, FL 34103 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: RONALD W. GUSTASON 01/12/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PRES () Delete Title: P (X) Change () Addition

 Name:
 MONTECALVO, DAWN
 Name:
 LONG, RANDAL D

 Address:
 6200 SHIRLEY ST. #206
 Address:
 P.O. BOX 812

 City-St-Zip:
 NAPLES, FL 34109
 City-St-Zip:
 NAPLES, FL 34106

Title: P-EL () Delete Title: VP (X) Change () Addition Name: LONG, RANDAL Name: WYNN, JERRY M

 Name:
 LONG, RANDAL
 Name:
 WYNN, JERRY M

 Address:
 PO BOX 812
 Address:
 P.O. BOX 812

 City-St-Zip:
 NAPLES, FL 34106
 City-St-Zip:
 NAPLES, FL 34106

Title: VP () Delete Title: T (X) Change () Addition

 Name:
 WYNN, JERRY
 Name:
 CRANDALL, JAMES J

 Address:
 PO BOX 812
 Address:
 P.O. BOX 812

 City-St-Zip:
 NAPLES, FL 34106
 City-St-Zip:
 NAPLES, FL 34106

Title: SECY () Delete Title: S (X) Change () Addition

 Name:
 HAZELBAKER, JANA
 Name:
 FONTANA, FRANK C

 Address:
 PO BOX 812
 Address:
 P.O. BOX 812

 City-St-Zip:
 NAPLES, FL 34106
 City-St-Zip:
 NAPLES, FL 34106

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

 Name:
 CRANDALL, JAY
 Name:

 Address:
 PO BOX 812
 Address:

 City-St-Zip:
 NAPLES, FL 34106
 City-St-Zip:

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

 Name:
 FONTANA, FRANK
 Name:

 Address:
 PO BOX 812
 Address:

 City-St-Zip:
 NAPLES, FL 34106
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: FRANK C. FONTANA S 01/12/2009