

ANNUAL REPORT
1995

STATE OF FLORIDA
DEPARTMENT OF CORPORATIONS

93 APR 18 PM 11:25

DOCUMENT # **719853** (8)
T. Corporation Name
ROTARY CLUB OF CYPRESS GARDENS, FLORIDA, INCORPORATED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 11/06/1970	3a. Date of Last Report 01/20/1994
4. FEI Number 59-1350055	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input checked="" type="checkbox"/>	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Principal Place of Business		Mailing Address	
P.O. BOX 485 WINTER HAVEN FL 33880		P.O. BOX 485 WINTER HAVEN FL 33880	
2. Principal Place of Business	2a. Mailing Address	21	28
Suite, Apt. #, etc.	Suite, Apt. #, etc.	22	27
City & State	City & State	23	29
Zip	Country	24	30

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
NEAL, DAVID C DR 1050 W LK HAMILTON DRIVE WINTER HAVEN FL 33880		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PHILLIPS, ROBERT	1.2 NAME	
STREET ADDRESS	827 N. LAKE OTIS DRIVE	1.3 STREET ADDRESS	
CITY - ST - ZIP	WINTER HAVEN FL 33884	1.4 CITY - ST - ZIP	
TITLE	D	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GOLDSMITH, JIM	2.2 NAME	
STREET ADDRESS	200 COLLEGE GROVE	2.3 STREET ADDRESS	
CITY - ST - ZIP	WINTER HAVEN FL 33881	2.4 CITY - ST - ZIP	
TITLE	SD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	O'SHEA, MARILYN	3.2 NAME	
STREET ADDRESS	2241 FIRESTONE PLACE	3.3 STREET ADDRESS	
CITY - ST - ZIP	WINTER HAVEN FL 33884	3.4 CITY - ST - ZIP	
TITLE	TD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FERGUSON, MAX G	4.2 NAME	
STREET ADDRESS	2538 PARTRIDGE DRIVE S.E.	4.3 STREET ADDRESS	
CITY - ST - ZIP	WINTER HAVEN FL 33884	4.4 CITY - ST - ZIP	
TITLE	D	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRIDWELL, PAUL	5.2 NAME	
STREET ADDRESS	206 EAST LAKE AVENUE	5.3 STREET ADDRESS	
CITY - ST - ZIP	AUBURNDALE FL 33823	5.4 CITY - ST - ZIP	
TITLE	D	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BROWN, LARRY	6.2 NAME	
STREET ADDRESS	364 PASCO CT. S.E.	6.3 STREET ADDRESS	
CITY - ST - ZIP	WINTER HAVEN FL 33884	6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 817, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, upon an attachment with an address.

SIGNATURE: _____ DATE: 04/12/95
SIGNATURE AND TITLE OF CURRENT REGISTERED AGENT OR SIGNING OFFICER OR DIRECTOR