2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT#719653

FILED Oct 10, 2006 Secretary of State

Entity Name: ROTARY CLUB OF CYPRESS GARDENS, FLORIDA, INCORPORATED

Current Principal Place of Business:		New Principal Place of Business:	
P.O. BOX WINTER H	485 HAVEN, FL 33882		
Current Mailing Address:		New Mailing Address:	
P.O. BOX WINTER H	485 HAVEN, FL 33882		
In accordan	ice with s. 607.193(2)(b), F.S., the corporation did not receiv	=	ce.
Name and	Address of Current Registered Agent:	Name and	d Address of New Registered Agent:
BURR, DIANE J 1285 FIRST ST. S. WINTER HAVEN, FL 33880 US		BURR, DI. 250 AVE. WINTER I	ANE J K, S.W., SUITE 106 HAVEN, FL 33880 US
	e named entity submits this statement for the purpose e of Florida.	e of changing	its registered office or registered agent, or both,
SIGNATUR	RE: DIANE J. BURR		10/10/2006
	Electronic Signature of Registered Agent		Date
OFFICER	S AND DIRECTORS:	ADDITIO	NS/CHANGES TO OFFICERS AND DIRECTORS
Title: Name: Address: City-St-Zip:	D () Delete MAY, WILLARD 9 LAKE LINK DR SE WINTER HAVEN, FL 33884	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	P () Delete SOLOMON, CORRIE 303 ORANGE BLOSSOM DRIVE WINTER HAVEN, FL 33880	Title: Name: Address: City-St-Zip:	PP (X) Change () Addition SOLOMON, CORRIE 303 ORANGE BLOSSOM DRIVE WINTER HAVEN, FL 33880
Title: Name: Address: City-St-Zip:	PP () Delete HADDEN, JACK 5664 CYPRESS GARDENS BLVD WINTER HAVEN, FL 33884	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () Delete DANIELS, DEBORAH 671 HART LAKE DR WINTER HAVEN, FL 33884	Title: Name: Address: City-St-Zip:	PP (X) Change () Addition DANIELS, DEBORAH 671 HART LAKE DR WINTER HAVEN, FL 33884
Title: Name: Address:	D () Delete SHEIL, PAT 50 W. LAKE HAMILTON CR WINTER HAVEN, FL 33880	Title: Name: Address: City-St-Zip:	() Change () Addition
City-St-Zip:		Title:	PP (X) Change () Addition

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: DIANE J. BURR SEC 10/10/2006