

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723160

FILED  
Apr 24, 2008  
Secretary of State

**Entity Name:** ROTARY CLUB OF CORAL GABLES, FLORIDA, INC

**Current Principal Place of Business:**

1014 SALZEDO STREET  
APT 200  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 14-1446  
CORAL GABLES, FL 33114

**New Mailing Address:**

**FEI Number:** 59-6152307

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MJF REGISTERED AGENT CORP  
153 SEVILLA AVE  
CORAL GABLES, FL 33134 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: P ( ) Delete  
Name: DAVID, MITCHELL  
Address: 6700 SANTONA STREET  
City-St-Zip: CORAL GABLES, FL 33143

Title: V ( ) Delete  
Name: TROMBLEY, DONALD  
Address: 7540 SW174TH STREET  
City-St-Zip: MIAMI, FL 33157

Title: S ( ) Delete  
Name: SWAIN, DEBORAH  
Address: 4015 UNIVERSITY DRIVE  
City-St-Zip: CORAL GABLES, FL 33146

Title: TR ( ) Delete  
Name: FORSHEE, WILLIAM  
Address: 6100 SW 85TH AVENUE  
City-St-Zip: MIAMI, FL 33143

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: WILLIAM FORSHEE

TR

04/24/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date