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Jan 27 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 726202 (5)

1. Corporation Name

DELRAY BEACH ROTARY FUND, INC.

Principal Place of Business	Mailing Address
P. O. BOX 807 DELRAY BEACH FL 33447	P. O. BOX 807 DELRAY BEACH FL 33447-0807

3. Date Incorporated or Qualified: 04/23/1973
3a. Date of Last Report: 01/29/1996

2. Principal Place of Business — 21
Suite, Apt. #, etc. — 22
City & State — 23
Zip — 24 Country — 25

2a. Mailing Address — 26
Suite, Apt. #, etc. — 27
City & State — 28
Zip — 29 Country — 30

4. FEI Number: 23-7313386 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

SIMON, ERNEST G
STE. A-1, 100 N.E. FIFTH AVENUE
DELRAY BEACH FL 33483

10. Name and Address of New Registered Agent

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 617.0502 and 617.1508, 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 617.0503, 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	PD	☒ DELETE	1.1 TITLE	PD	☒ Change ☐ Addition
NAME	WEBB, GENE		1.2 NAME	OWENS, NANCY E.	
STREET ADDRESS	1901 S OCEAN BLVD		1.3 STREET ADDRESS	1066 SW 14TH ST	
CITY-ST-ZIP	DELRAY BEACH FL		1.4 CITY-ST-ZIP	BOCA RATON, FL 33486	
TITLE	VD	☒ DELETE	2.1 TITLE	VD	☒ Change ☐ Addition
NAME	OWENS, NANCY E		2.2 NAME	O'CONNELL DAVID F	
STREET ADDRESS	1066 SW 14 ST		2.3 STREET ADDRESS	519 SW 9TH AVE	
CITY-ST-ZIP	BOCA RATON FL		2.4 CITY-ST-ZIP	BOCA RATON, FL 33486	
TITLE	SD	☒ DELETE	3.1 TITLE	SD	☒ Change ☐ Addition
NAME	COLVARD, JUDITH A		3.2 NAME	GALLOWAY, BRUCE	
STREET ADDRESS	70 S.E. 4TH AVE.		3.3 STREET ADDRESS	4515 FICUS TREE RD NoB	
CITY-ST-ZIP	DELRAY BEACH FL 33483		3.4 CITY-ST-ZIP	BOYNTON BEACH, FL 33436	
TITLE	TD	☒ DELETE	4.1 TITLE	TD	☒ Change ☐ Addition
NAME	CATO, MICHAEL D		4.2 NAME	PELTZIE, KENNETH	
STREET ADDRESS	1302 S.W. 25TH PLACE		4.3 STREET ADDRESS	2260 RABBIT HOLLOWE CIRCLE	
CITY-ST-ZIP	BOYNTON BCH. FL 33483		4.4 CITY-ST-ZIP	DELRAY BEACH, FL 33445	
TITLE	D	☒ DELETE	5.1 TITLE	D	☒ Change ☐ Addition
NAME	BATES, STEVEN		5.2 NAME	GUMM, EMMETT F.	
STREET ADDRESS	1225 S. OCEAN BLVD.		5.3 STREET ADDRESS	15791 LOCH MARGE LANE	
CITY-ST-ZIP	DELRAY BCH. FL 33483		5.4 CITY-ST-ZIP	DELRAY BEACH, FL. 33446	
TITLE	SD	☒ DELETE	6.1 TITLE	D	☒ Change ☐ Addition
NAME	SWINFORD, JOHN A		6.2 NAME	SIMON, ERNEST G.	
STREET ADDRESS	200 S OCEAN BLVD #122		6.3 STREET ADDRESS	3476 ROYAL TERN LN.	
CITY-ST-ZIP	DELRAY BEACH FL		6.4 CITY-ST-ZIP	BOYNTON BEACH, FL 33436	

CR2E037 (9/96)

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Ernest G. Simon ERNEST G. SIMON, UNITED — 1-14-97 — 561-278-2601
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone # 0043346