


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # 726202 1. Entity Name DELRAY BEACH ROTARY FUND, INC.		
Principal Place of Business P. O. BOX 807 DELRAY BEACH FL 33447		Mailing Address P. O. BOX 807 DELRAY BEACH FL 33447 255 N.E. 2ND AVE. DELRAY BEACH, FL. 33444
2. Principal Place of Business	3. Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State	City & State	
Zip	Country	Country

FILED
05 JUN 10 PM 4:25



6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
SIMON, ERNEST G STE. A-1, 100 N.E. FIFTH AVENUE DELRAY BEACH FL 33483				Name			
				Street Address (P.O. Box Number is Not Acceptable)			
				600056149086 06/14/05--01034--007 **\$1.25			
				City			
FL				Zip Code			

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	P DENKLER, MARK 320 NW 9TH ST. DELRAY BEACH FL	<input type="checkbox"/> Delete	PRESIDENT BILL ADAMS 19 NW 24TH CT. DELRAY BEACH, FL 33444 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SOWARDS, JESS M 635 EDDY ST. BOCA RATON FL 33487	<input type="checkbox"/> Delete	PRESIDENT-ELECT LEO PHILLIPS 50 EAST ROAD APT 2A DELRAY BEACH, FL 33483 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	SD SOWARDS, JESS M 635 EDDY ST. BOCA RATON FL 33487	<input type="checkbox"/> Delete	SECRETARY JESS M. SOWARDS 635 EDDY STREET BOCA RATON, FL. 33487 <input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY-ST-ZIP	D SIMON, ERNEST G. 3476 ROYAL TURN LANE BOYNTON BEACH FL	<input type="checkbox"/> Delete	TREASURER SHIRLEY M. CRACK 219 WANDERBIET DR. LAKE WORTH, FL. 33460 <input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY-ST-ZIP	D KERR-JARRETT, GEORGINA 6858 VILLAS DR WEST BOCA RATON FL	<input type="checkbox"/> Delete	DIRECTOR ERNEST G. SIMON 3476 ROYAL TURN LANE BOYNTON BEACH, FL. 33436 <input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY-ST-ZIP	VP ADAMS, WILLIAM 19 NW 24 COURT DELRAY BEACH FL 33444	<input type="checkbox"/> Delete	PAST PRESIDENT MARK DENKLER 320 N.W. 9TH ST. DELRAY BEACH, FL. 33444 <input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **WILLIAM S. ADAMS** 5/10/05 561 274-8398

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #