2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2005 8:00 am
Secretary of State
01-20-2005 90026 016 ****61.25

DOCUMENT # 733887

1. Entity Name
ROTARY CLUB OF LAKE PLACID, FLORIDA, INCORPORATE

Principal Place of Business	Mailing Address
P. O. BOX 312 LAKE PLACID, FL 33862-0312	P. O. BOX 312 LAKE PLACID, FL 33862-0312

01072005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1713201 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SHROCK, LARRY L 1552 SPRING LANE LAKE PLACID, FL 33852	Name Street Address (P.O. Box Number is Not Acceptable) 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2005

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BOHLMAN, PHYLLIS 5 N. MAIN STREET LAKE PLACID, FL 33852	☒ Delete XX	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD Norman Church 516 Washington Blvd. Lake Placid, Florida 33852	☐ Change ☒ Addition XX
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD BOHLMAN, PHYLLIS 5 N. MAIN STREET LAKE PLACID, FL 33852	☒ Delete XX	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD SAPP, LARRY 624 U.S. HWY 27 SOUTH LAKE PLACID, FL 33852	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD	☒ Change XX ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD DAVIS, NANCY 417 U.S. HWY 27 SOUTH LAKE PLACID, FL 33852	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD SHEEHAN, TIMOTHY 401 DAL HALL BLVD. LAKE PLACID, FL 33852	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Larry L. Shrock 1552 Spring Lane Lake Placid, Florida 33852	☐ Change ☒ Addition XX
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ 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: Larry L. Shrock Larry L. Shrock 1/17/05 863-465-0113
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #