

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735400

FILED
Jan 15, 2009
Secretary of State

Entity Name: MERRITT ISLAND ROTARY FOUNDATION INC.

Current Principal Place of Business:

677 DAVE MISBET DRIVE SUITE 110
CAPE CANAVERAL, FL 32920

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 541122
MERRITTISLAND, FL 32954

New Mailing Address:

FEI Number: 59-1688326

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLNEY, PATRICIA K
677 DAVE MISBET DRIVE SUITE 110
CAPE CANAVERAL, FL 32920 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: D () Delete
Name: CASEY, WILLIAM
Address: 5216 PADDOCK WAY
City-St-Zip: MERRITT ISLAND, FL 32952

Title: D () Delete
Name: VICKERS, CHARLES A JR
Address: 535 E MERRITT ISLAND CSWY
City-St-Zip: MERRITT ISLAND, FL 32952

Title: T () Delete
Name: WHITE, NORM
Address: 428 SOUTH BREVARD AVENUE
City-St-Zip: COCOA BEACH, FL 32931

Title: D () Delete
Name: LEDFORD, GARY
Address: 1808 LAUREL OAK DRIVE
City-St-Zip: ROCKLEDGE, FL 32955

Title: D () Delete
Name: MEGREGIAN, MARTY
Address: 4245 N COURTENAY PARKWAY
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D () Delete
Name: BONENBERGER, GREG
Address: 795 NEW HAMPTON WAY
City-St-Zip: MERRITT ISLAND, FL 32953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: CASEY, WILLIAM
Address: 5216 PADDOCK WAY
City-St-Zip: MERRITT ISLAND, FL 32952

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

Title: DT (X) Change () Addition
Name: BURKETT, GENE
Address: 1865 CANTERBURY DRIVE
City-St-Zip: INDIALANTIC, FL 32903

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

Title: D (X) Change () Addition
Name: AYMOND, LINDA
Address: 1904 BARRINGTON CIRCLE
City-St-Zip: ROCKLEDGE, FL 32955

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: GENE BURKETT

DT

01/15/2009

Electronic Signature of Signing Officer or Director

Date