FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # 735711

(4)

DEERFIELD BEACH ROTARY CLUB, INC.

VLLIII	TIELD BEACH HOTART CLC	JD, ING.						
Principal Plac	e of Business	Mailing Address					181 1161 \$1611 B1611 B16	in arbit Glatt Bibis 188
P.O. BOX 10	TRY CLUB BLVD 10 BCH FL 33443	P.O. BOX 100 P.O. BOX 100 DEERFIELD BOH FL 33442						
US		US	••			te Incorporated or Qualified 05/03/1976	3a. Date o	of Last Report 01/1995
21	Place of Business	2a. Mailing Address				59-61631/9		Applied For Not Applicat
Suite, Apt.		Suite, Apt. #, etc.			5. Ce	rtificate of Status Desired	\$	8.75 Additional Fee Required
City & Stat 23	le	City & State			l l	ection Campaign Financing ast Fund Contribution		\$5.00 May Be Added to Fees
Zip 24	Country 25	Ζφ 29	30 Cou	ntry		is corporation has liability for	r intangible tax ur	nder s. 199.032,
	9. Name and Address of Curre	nt Registered Agent				me and Address of New	Registered Age	nt
D	00H 050B05 :			81 Name	e	-		
PATTERSON, GEORGE A. 665 SOUTHEAST TENTH ST.			-	82 Stree	t Address (P.O. E	dress (P.O. Box Number is Not Acceptable)		
DEERFIE	ELD BCH FL 33441			83				
				84 City			FL 8	5 Zip Code
Or registe	to the provisions of Sections 617.050 red agent, or both, in the State of Flor ith, and accept the obligations of, Sec	nua. Such change was aumonze	s, the abou	re-named o orporation:	corporation subm s board of direct	nits this statement for the poors. I hereby accept the ap	 1	ng its registered of stered agent. I am
SIGNATURE	Signature, typed or printed name of registered ager							
12.		ND DIRECTORS	13.	Agent signature	required when reinstate	ing) DITIONS/CHANGES TO OF	DATE FICEDS AND DIE	ECTORS IN 19
TITLE	VP	DELETE	1.1 7(1	.E	The state of the s	DITIONO OF ANGES TO OF		
NAME	WEBEL, DANIELLE	_	1.2 NA	ΛE			<u></u>	
STREET ADDRESS	431 SE 3RD CT		1.3 STF	EET ADDRESS	;			
CITY-ST-ZIP	DEERFIELD BCH FL		1.4 CIT	Y - S1 - ZIP				
TITLE	P CTCEANIZZI CAROL	DELETE	2 1 TIT	.E			□ C+	hange 🔲 Addition
NAME	STEFANIZZI, CAROL 941 SW 19TH ST		2 2 NA	ΛE	ļ			
STREET ADDRESS	BOCA RATON FL		2.3 STF	EET ADDRESS	ĺ			
CITY-ST-ZIP TITLE	D	FIDELETE		Y-ST-ZIP				
NAME	LAMBERTI, ALFRED	DELETE	3.1 TITI				Cr	nange 🔲 Addition
STREET ADDRESS	6970 N.W. 23RD STREET		3.2 NA	AT EET ADDRESS				
CITY-ST-ZIP	MARGATE FL 33063			Y-S1-ZIP				
TITLE	D	DELETE	41 TH				□ Ch	nange
NAME	BIRKMAN, ARLAN, H	_	4. 2 NA	-			<u> </u>	
STREET ADDRESS	809 SE 8TH ST			EFT ADDRESS				
CHY-ST-ZIP	DEERFIELD BEACH FL		4.4 CIT	r-ST-ZIP				
TITLE	S DECEMBER 1 APPLY	DELETE	5.1 TITL	E			Ch	nange Addition
NAME	DEETJEN, LARRY		5 2 NAN	'É				
STREET ADORESS	150 NE 2ND AVE DEERFIELD BEACH FL		5.3 STR	EET ADDRESS				
CITY-ST-ZIP TITLE	DECRIELU DEACH FL	DELETE	_	-ST-ZIP	ļ			
NAME	SITES, PHILLIP B.		61 TITL		1		☐ Ch	lange
STREET ADDRESS	2541 EMERALD WAY N.		62 NAN					
CITY-ST-ZIP	DEERFIELD BEACH FL			EET ADDRESS				
14. Ldo bereb	v certify that the information supplied	with this filing is voluntarily furnis	had and d	-ST-ZIP bes not qua	alify for the exem	ption stated in Section 119	.07(3)(k), Florida 9	Statutes I further
certify that oath; that appears in	t the information indicated on this ann I am an officer or director of the corpo Block 12 or Block 12 if changed	ual report or supplemental annual station or the receiver or trustee on an attachment with an address	al report is empowere ss.	true and ad d to execu	ccurate and that ite this report as i	my signature shall have the required by Chapter 617, F	e same legal effec lorida Statutes; ar	t as if made under nd that my name

SIGNATURE: X

TYPES SENITED NAME OF SIGNING OFFICER OR DIRECTOR

APR. 2. 1996 (305) 50-5929

CR2E037 (12/95