## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 737054**

FILED Jan 11, 2006 Secretary of State

Entity Name: ROTARY CLUB OF INVERNESS, INCORPORATED **Current Principal Place of Business: New Principal Place of Business:** 727 SOUTH US HWY 41 4543 E. WINDMILL DRIVE INVERNESS, FL 34450 INVERNESS, FL 34453 **Current Mailing Address: New Mailing Address:** P.O. BOX 1317 INVERNESS, FL 34451 FEI Number: 59-2068516 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SLAYMAKER, THOMAS 2218 W HWY 44 INVERNESS, FL 34450 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition HARRIS, PAUL LOBEL, DOUG Name: Name: 3613 E HAVEN STREET Address: 1537 E. VENTNOR LANE Address: City-St-Zip: INVERNESS, FL 34453 City-St-Zip: INVERNESS, FL 34453 Title: () Delete Title: (X) Change ( ) Addition Name: DAVIES, CRAIG Name: HARRIS, PAUL Address: 3250 S BLACKMOUNTAIN DR Address: 100 N. FLORIDA AVENUE City-St-Zip: INVERNESS, FL 34450 City-St-Zip: INVERNESS, FL 34453 Title: () Delete Title: () Change () Addition MARTIN, REBECCA Name: Name: 6710 S. BEAGLE DRIVE Address: Address: City-St-Zip: HOMOSASSA, FL 344484961 City-St-Zip: Title: () Delete Title: () Change () Addition Name: HUNT, DORA Name: 9730 E. REGENCY ROW Address: Address: City-St-Zip: INVERNESS, FL 34450 City-St-Zip: Title: () Delete Title: PΕ (X) Change ( ) Addition LOBEL, DOUG HAMILTON, GREG Name: Name: 6090 E DALY LANE 301 W. MAIN STREET Address: Address: INVERNESS, FL 34452 City-St-Zip: City-St-Zip: INVERNESS, FL 34450

I hereby certify that the information supplied with this filing does not qualify for the 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: DORA F. HUNT Т 01/11/2006