

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737054

FILED
Apr 14, 2008
Secretary of State

Entity Name: ROTARY CLUB OF INVERNESS, INCORPORATED

Current Principal Place of Business:

4543 E. WINDMILL DRIVE
INVERNESS, FL 34453

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1317
INVERNESS, FL 34451

New Mailing Address:

FEI Number: 59-2068516

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SLAYMAKER, THOMAS
2218 W HWY 44
INVERNESS, FL 34450 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: P () Delete
Name: HAMILTON, GREG
Address: 301 W. MAIN STREET
City-St-Zip: INVERNESS, FL 34450

Title: PP () Delete
Name: LOBEL, DOUG
Address: 1537 E. VENTNOR LANE
City-St-Zip: INVERNESS, FL 34453

Title: S () Delete
Name: MARTIN, REBECCA
Address: 6710 S. BEAGLE DRIVE
City-St-Zip: HOMOSASSA, FL 344484961

Title: T () Delete
Name: HUNT, DORA
Address: 9730 E. REGENCY ROW
City-St-Zip: INVERNESS, FL 34450

Title: PE () Delete
Name: YERMAN, MARK
Address: 110 NORTH APOPKA
City-St-Zip: INVERNESS, FL 34450

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: YERMAN, MARK
Address: 110 N APOPKA AVENUE
City-St-Zip: INVERNESS, FL 34450

Title: PP (X) Change () Addition
Name: HAMILTON, GREG
Address: 15365 CORTEZ BLVD
City-St-Zip: BROOKSVILLE, FL 34613

Title: S (X) Change () Addition
Name: TESSMER, ROB
Address: 621 EDEN DRIVE
City-St-Zip: INVERNESS, FL 34452

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

Title: PE (X) Change () Addition
Name: HENSLEY, MELANIE
Address: 7620 E APPLEWOOD DRIVE
City-St-Zip: INVERNESS, FL 34450

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: DORA F HUNT

T

04/14/2008

Electronic Signature of Signing Officer or Director

Date