

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746409

FILED
Mar 19, 2009
Secretary of State

Entity Name: ROTARY CLUB OF LAKE BUENA VISTA, INC.

Current Principal Place of Business:

2000 HOTEL PLAZA BLVD
LAKE BUENA VISTA, FL 32830

New Principal Place of Business:

1850 HOTEL PLAZA BLVD
LAKE BUENA VISTA, FL 32830

Current Mailing Address:

1675 BUENA VISTA BLVD
P O BOX 22033
LAKE BUENA VISTA, FL 32830

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

WRIGHT, PHIL
4031 SALMON DRIVE
ORLANDO, FL 32835 US

Name and Address of New Registered Agent:

JERRY NEIBERT
9921 NOKAY DRIVE
ORLANDO, FL 32836 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: JERRY S. NEIBERT

03/19/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: NEIBERT, JERRY
Address: 9921 NOKAY DR
City-St-Zip: ORLANDO, FL 32836 US

Title: VP () Delete
Name: BUONCERVELLO, SONNY
Address: 215 CELEBRATION PLACE STE 190
City-St-Zip: CELEBRATION, FL 34747 US

Title: TD () Delete
Name: BOARDMAN, HARRY
Address: 8986 ISLEWORTH CT
City-St-Zip: ORLANDO, FL 32819 US

Title: T (X) Delete
Name: POULIOT, TOM
Address: 141 EASTPARK DR
City-St-Zip: CELEBRATION, FL 34747 US

Title: S (X) Delete
Name: SAULINE, MJ
Address: 600 PINEVIEW TRAIL
City-St-Zip: KISSIMMEE, FL 34747

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: JERRY S. NEIBERT

PRES

03/19/2009

Electronic Signature of Signing Officer or Director

Date