2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747477

FILED Jun 24, 2009 Secretary of State

Entity Name: DADE CITY ROTARY CLUB, INC.

Current Principal Place of Business: New Principal Place of Business:

14950 US 301 14150 6TH STREET

DADE CITY, FL 33523 US DADE CITY, FL 33525 US

Current Mailing Address: New Mailing Address:

P.O. BOX 44

DADE CITY, FL 33526 US

FEI Number: 59-6152295 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BROWN, LEE GERMAIN, JEANIE 13351 10TH STREET 14150 6TH STREET

DADE CITY, FL 33525 DADE CITY, FL 33525 US 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: JEANIE GERMAIN 06/24/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition

() Delete (X) Change () Addition

FINNERTY, JOHN LARKIN, GORDON R Name: Name: 36731 MISSOURI AVE Address: 11825 OLD LAKELAND HIGHWAY Address:

City-St-Zip: DADE CITY, FL 33523 City-St-Zip: DADE CITY, FL 33525

Title: () Delete Title: () Change () Addition

CARSON, DWIGHT Name: Name: Address: 37612 CARSON LANE Address: City-St-Zip: DADE CITY, FL 33525 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

SOLBERG, GINNY Name: GERMAIN, JEANIE Name:

37235 ORANGE VALLEY LN 38113 COUNTRYSIDE PLACE Address: Address: City-St-Zip: DADE CITY, FL 33523 City-St-Zip: DADE CITY, FL 33523

() Delete Title: VΡ Title: (X) Change () Addition

COX, STEVE FINNERTY, JOHN Name: Name: MOORE MICKENS CTR. M.L.K. AVE. 36731 MISSOURI AVENUE Address: Address:

City-St-Zip: DADE CITY, FL 33523 City-St-Zip: DADE CITY, FL 33525

Title: () Delete HOWARD, ANITA Name: Name: 37300 ROYAL OAK LANE Address: Address: City-St-Zip: DADE CITY, FL 33525 City-St-Zip:

Title: (X) Delete Title: () Change () Addition

LARKIN, BOB Name: Name: Address: 11825 OLD LAKELAND HWY Address: DADE CITY, FL 33525 City-St-Zip: 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.

Title:

SIGNATURE: GORDON R. LARKIN Ρ 06/24/2009