

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747510

FILED
Jan 24, 2009
Secretary of State

Entity Name: THE ROTARY CLUB OF LONGWOOD, FLORIDA, INC.

Current Principal Place of Business:

POST OFFICE BOX 915401
LONGWOOD, FL 32791

New Principal Place of Business:

1749 ART HAGAN PLACE
LONGWOOD, FL 32750

Current Mailing Address:

POST OFFICE BOX 915401
LONGWOOD, FL 32791

New Mailing Address:

FEI Number: 59-1902431

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORTES, CARLOS
329 W. HORNBEAM DRIVE
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

CORTES, CARLOS
329 W. HORNBEAM DRIVE
LONGWOOD, FL 32779 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: CARLOS CORTES

01/24/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SINGER, ALAN
Address: 222 TOLLGATE TRAIL
City-St-Zip: LONGWOOD, FL 32750

Title: P () Delete
Name: MORRIS, DAVID
Address: 312 WINDHAM WAY
City-St-Zip: CASSELBERRY, FL 32707

Title: D () Delete
Name: MICHAL, PAUL S
Address: 223 MAIN ROAD
City-St-Zip: LAKE MARY, FL 32746

Title: D () Delete
Name: CONLON, CRAIG
Address: 1414 N MARVIN ST
City-St-Zip: LONGWOOD, FL 32750

Title: D () Delete
Name: VOLITGA, ROBERT
Address: 108 MCADOWERGER LANE
City-St-Zip: LONGWOOD, FL 32750

Title: T () Delete
Name: ROBINSON, WILLIAM C
Address: 659 TAM COURT
City-St-Zip: WINTER SPRINGS, FL 32708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CONLON, CRAIG
Address: 1414 N MARVIN ST
City-St-Zip: LONGWOOD, FL 32750

Title: S (X) Change () Addition
Name: CORTES, CARLOS
Address: 329 HORNBEAM DRIVE
City-St-Zip: LONGWOOD, FL 32779

Title: D (X) Change () Addition
Name: MICHALSKI, PAUL
Address: 223 MAIN ROAD
City-St-Zip: LAKE MARY, FL 32746

Title: D (X) Change () Addition
Name: MORRIS, DAVID
Address: 312 WINDHAM WAY
City-St-Zip: CASSELBERRY, FL 32707

Title: D (X) Change () Addition
Name: VOLITER, ROBERT
Address: 108 MEADOWCREEK COVE
City-St-Zip: LONGWOOD, FL 32750

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: WILLIAM C. ROBINSON

TREA

01/24/2009

Electronic Signature of Signing Officer or Director

Date