2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755774

FILED Jan 26, 2005 Secretary of State

Entity Name: ROTARY CLUB OF OCEANSIDE DAYTONA BEACH, INC.

Current Principal Place of Business:		New Principal Place of Business:		
P.O. BOX SOUTH D	214011 AYTONA, FL 3212	1		
Current Mailing Address:		New Mailing Address:		
P.O. BOX SOUTH D	214011 AYTONA, FL 3212	1		
FEI Number	: 59-6550584 FE	Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of Curre	nt Registered Agent:	Name and Address of	of New Registered Agent:
945 W. IN	THOMAS W TERNATIONAL SPI A BEACH, FL 32114			
	e named entity subm e of Florida.	nits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
n the Stat	e of Florida.	nits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
n the Stat	e of Florida. RE:	nits this statement for the grant of the grant of Registered Ag		ed office or registered agent, or both, Date
in the Stat	e of Florida. RE:	gnature of Registered Ag	ent	
n the Stati BIGNATU DFFICER Fitle: Name: Address:	e of Florida. RE: Electronic Si	gnature of Registered Ag S: te	ent	Date
in the Stati SIGNATU OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	e of Florida. RE: Electronic Si S AND DIRECTOR PD () Delet ROLL, DANIEL O P.O. BOX 9658	gnature of Registered Ag S: te L 32120 te	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS
in the Stat	e of Florida. RE: Electronic Si S AND DIRECTOR PD () Deleter ROLL, DANIEL O P.O. BOX 9658 DAYTONA BEACH, F VD () Deleter THORNTON, BRUCE 622 HALE MOON DR	gnature of Registered Ag S: te L 32120 te . 32127 te V	ent ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: THOMAS W. STONER SD 01/26/2005