

2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

FILED
Mar 31, 2008 8:00 am
Secretary of State

03-31-2008 90006 048 ****61.25

DOCUMENT # 755774



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

Principal Place of Business
**P.O. BOX 214011
SOUTH DAYTONA, FL 32121**

Mailing Address
**P.O. BOX 214011
SOUTH DAYTONA, FL 32121**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03202008

Chg-NP

CR2E037 (12/06)

4. FEI Number
59-6550584

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**STONER, THOMAS W
945 W. INTERNATIONAL SPEEDWAY BLVD.
DAYTONA BEACH, FL 32114**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **P** ☒ Delete
NAME **CLIFT, DENNY**
STREET ADDRESS **2040 ORIOLE LANE**
CITY - ST - ZIP **DAYTONA BEACH, FL 32119**

TITLE **S** ☒ Delete
NAME **DECARIE, JOHN**
STREET ADDRESS **452 PENDRY DR.**
CITY - ST - ZIP **PORT ORANGE, FL 32127**

TITLE **V** ☒ Delete
NAME **STONER, THOMAS W**
STREET ADDRESS **2828 N. ATLANTIC AVENUE, #702**
CITY - ST - ZIP **DAYTONA BEACH, FL 32118**

TITLE **TD** ☐ Delete
NAME **ZAHN, PETER A JR.**
STREET ADDRESS **1709 S. PENINSULA DR.**
CITY - ST - ZIP **DAYTONA BEACH, FL 32118**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☒ Change ☐ Addition
NAME **STONER, THOMAS W**
STREET ADDRESS **2828 N. ATLANTIC AVENUE, #702**
CITY - ST - ZIP **DAYTONA BEACH, FL 32118**

TITLE **S** ☒ Change ☐ Addition
NAME **KING, JAMES**
STREET ADDRESS **12 AUDUBON LANE**
CITY - ST - ZIP **FLAGLER BEACH, FL 32136**

TITLE **V** ☒ Change ☐ Addition
NAME **DECARIE, JOHN**
STREET ADDRESS **452 PENDRY DRIVE**
CITY - ST - ZIP **PORT ORANGE, FL 32127**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: *Thomas W. Stoner* **THOMAS W. STONER**
PRESIDENT

3-26-08 386-258-6188

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #