2000 UNIFORM BUSINESS REPORT (UBR)

DOCU 1. Entity Nam	MENT # 758749 ne ROTARY CLUB OF SAN	FORD_BREAKFAST,	florida,	INC.	Apr 05, 2 Secreta	LED 2000 8:0 ry of St	
Principal Plac	ce of Business	Mailing Address				0103 038	11.23
	Place of Business Forth Park Avenue #, etc. ,	3. Mailing Address Post Office Box 1652 Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & State Sanford, FL Zip Country		City & State Sanford, FL Zip Country			4. FEI Number		
Zip 32771	Seminole	32 ^{Zip} 2–1652	Seminole		5. Certificate of Status Desired	Fee Require	
	6. Name and Address of Current F	Registered Agent	Mama		7. Name and Address of New Regi	stered Agent	
	Name Street A	Timothy R. Askew, Jr. Street Address (P.O. Box Number is Not Acceptable) 230 N. Park Avenue					
	•		City	Sanf	1	FL Zip Code	e
8. The above	s named entity submits this statement for	isten,	egistered office of		····	<u>5277</u> L	3/00
	FILE NOW: FEE IS \$61.25	9. Election Campaign f Trust Fund Contribut				heck Payable to tment of State	
10.	OFFICERS AND DIRI		11.		ADDITIONS/CHANGES TO OFFICERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	4356 Sanf	Phillips Rocky Ridge Place ord, FL 32773	☐ Change	Addition 90
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	413	thy R. Askew, Jr. DeBary Avenue rprise, FL 32725	☐ Change	Addition C
TITLE NAME STREET ADDRESS CITY-ST-ZIP			NAME STREET ADDRESS CITY-ST-ZIP	179	Mann Wood Ridge Trail ord, FL 32771	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Mike Simaan 606 Briarcliffe Sanford, FL 32773	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2393 Sanf	Johnson Crest Ridge Court ord, FL 32771	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Pat Stenstrom 308 Lake Boulevard Sanford, FL 32773	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sanf	Kidd Iron Gate Court ord, FL 32771	☐ Change -	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Wen Stocksett 250 Art Lane Sanford, FL 32773	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	621 Sanf	Meeks Park Avenue ord, FL 32771	☐ Change	Addition
 12. Thereby c indicated 	certify that the information supplied with to on this report or supplemental report is	nis filing does not qualify for the and accurate and that my	ne exemption sta signature shall h	nave the s	ction 119.07(3)(i), Florida Statutes. I fur ame legal effect as if made under oath	ther certify that the in that I am an officer in	or director

PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR