


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 21, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # 759291 1. Entity Name ROTARY CLUB OF ORMOND BEACH, INC.	
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Principal Place of Business C/O WILLIAM AKERS, III 120 E. GRANADA BLVD., P.O. BOX 2633 ORMOND BEACH, FL 32176-6630	Mailing Address C/O WILLIAM AKERS, III 120 E. GRANADA BLVD., P.O. BOX 2633 ORMOND BEACH, FL 32176-6630
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**DO NOT WRITE IN THIS SPACE**



01092008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-6209568	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

AKERS, WILLIAM, III  
120 E. GRANADA BLVD., P.O. BOX 2633  
ORMOND BEACH, FL 32074

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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

9. Election Campaign Financing Trust Fund Contribution  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT GILKEY, KENNETH G 120 JOHN ANDERSON DR ORMOND BEACH, FL 32176
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP CONNORS, KEVIN 769 JOHN ANDERSON ORMOND BEACH, FL 32176
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS DISCH, BRAD 58 E. GRANADA BLVD. ORMOND BEACH, FL 32176
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

U00000834430  
02/28/08-80053-002 61.25

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: *William Akers III* 1/9/08 386 672 0420  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #