

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762001

FILED
Apr 22, 2009
Secretary of State

Entity Name: ROTARY CLUB OF LEESBURG (SUNRISE), INC.

Current Principal Place of Business:

% ARTHUR L BURKE
400-402 NORTH 14TH STREET
LEESBURG, FL 347484826

New Principal Place of Business:

9325 SE 109TH LANE
BELLEVIEW, FL 34420 US

Current Mailing Address:

% ARTHUR L BURKE
400-402 NORTH 14TH STREET
LEESBURG, FL 347484826

New Mailing Address:

P.O. BOX 490772
LEESBURG, FL 347490772 US

FEI Number: 59-6152302

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURKE, ARTHUR L
400-402 NORTH 14TH STREET
LEESBURG, FL 32748 US

Name and Address of New Registered Agent:

KING, PATRICK
9325 SE 109TH LANE
BELLEVIEW, FL 34420 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: PATRICK KING

04/22/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PP () Delete
Name: PARKS, SEAN
Address: PO BOX 490772
City-St-Zip: LEESBURG, FL 34749

Title: PE () Delete
Name: JERKINS, FORREST
Address: 3360 US HWY 441-27
City-St-Zip: FRUITLAND PARK, FL 32731

Title: P () Delete
Name: PEGG, JIM
Address: 11335 SWEETWATER CT
City-St-Zip: CLERMONT, FL 34715

Title: S () Delete
Name: FLINT, NANCY
Address: 707 CASCADE AVE
City-St-Zip: LEESBURG, FL 34748

Title: T () Delete
Name: KING, PATRICK
Address: PO BOX 1477
City-St-Zip: LADY LAKE, FL 32158

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: PEGG, JIM
Address: 11335 SWEETWATER CT
City-St-Zip: CLERMONT, FL 34715

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: KING, PATRICK
Address: 9325 SE 109TH LANE
City-St-Zip: BELLEVIEW, FL 34420

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: PATRICK KING

TRES

04/22/2009

Electronic Signature of Signing Officer or Director

Date