

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762944

FILED  
Apr 29, 2011  
Secretary of State

**Entity Name:** ROTARY CLUB OF SARASOTA SUNRISE, INC.

**Current Principal Place of Business:**

3713 BAHIA VISTA ST.  
SARASOTA, FL 34232 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 595  
SARASOTA, FL 34230 US

**New Mailing Address:**

FEI Number: 59-2089501

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CUNNINGHAM, ROBERT  
4567 MC INTOSH LANE  
SARASOTA, FL 34232 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: ELIADES, CAROLYN J  
Address: 7751 CHERRY LAUREL CT  
City-St-Zip: SARASOTA, FL 34241

Title: VP  
Name: CHARNEY, DAVE  
Address: 8240 BARTON FARMS BLVD  
City-St-Zip: SARASOTA, FL 34233

Title: SD  
Name: HEAGERTY, DAVID  
Address: 8105 COLLINGWOOD CT.  
City-St-Zip: SARASOTA, FL 34201

Title: TD  
Name: STANEY, SANDRA W  
Address: 7751 CHERRY LAUREL CT  
City-St-Zip: SARASOTA, FL 34241

Title: D  
Name: BOCKHOLD, GARY  
Address: 4104 ROBERTS POINT RD  
City-St-Zip: SARASOTA, FL 34242

Title: PD  
Name: JACOBSEN, LEIF  
Address: 5631 PAMELA WOOD WAY  
City-St-Zip: SARASOTA, FL 34233

I hereby 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 all other like empowered.

SIGNATURE: LEIF JACOBSEN

PD

04/29/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date