2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 25, 2008 08:00 AN **DOCUMENT #762994 Secretary of State** ROTÁRY CLUB OF SEMINOLE LAKE, FLORIDA, U.S.A., INC. Mailing Address Principal Place of Business **POST OFFICE BOX 3294** 9075 SEMINOLE BLVD. SEMINOLE, FL 33772 SEMINOLE, FL 33772 01102008 No Chg-NP CR2E037 (4/06) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For `59-2110073 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SCHULER, TIMOTHY C ESQ DO NOT WRITE 9075 SEMINOLE BLVD. SEMINOLE, FL 33772 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Filing Fee Is \$61.25 \$5.00 May Be Trust Fund Contribution. Added to Fees Due by May 1, 2008 OFFICERS AND DIRECTORS 10. DVP TITLE HENDRY, JAMES M NAME STREET ADDRESS 10475 - 68TH AVENUE N. CITY-ST-ZIP SEMINOLE, FL 33772 TITLE 000000836281 03/04/08-80009-018 61.25 NAME CRIMELLA, LISA STREET ADDRESS 12791 - 114TH ST CITY-ST-ZIP LARGO, FL 33778 TITLE NAME BESSLER, GEORGE STREET ADDRESS 9152 - 124TH WAY N. DO NOT WRITE City-St-ZIP SEMINOLE, FL 33772 IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP 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 attachmen th an address, with all other like empowered.

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-7P

NAME OF SIGNING OFFICER OR DIRECTOR

Daylima Phone #