

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764389

FILED  
Mar 25, 2009  
Secretary of State

Entity Name: LARGO ROTARY CLUB, INC.

**Current Principal Place of Business:**

10225 ULMERTON RD, SUITE 3A  
LARGO, FL 33771 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 578  
LARGO, FL 33779 US

**New Mailing Address:**

FEI Number: 59-6153462      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

LODEN, SCOTT T CPA  
4601 CENTRAL AVENUE  
ST. PETERSBURG, FL 33713 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: P ( ) Delete  
Name: GENTRY, GAY  
Address: 3072 KEENE PARK DR.  
City-St-Zip: LARGO, FL 33771

Title: D ( ) Delete  
Name: BROWN, WOODY  
Address: 422 WEST BAY DRIVE  
City-St-Zip: LARGO, FL 33770

Title: S ( ) Delete  
Name: LOHR, KRISTIN  
Address: 2529 HARN BLVD, #6  
City-St-Zip: CLEARWATER, FL 33764

Title: T ( ) Delete  
Name: JOHANSEN, WARD  
Address: 2480 STAG RUN BLVD  
City-St-Zip: CLEARWATER, FL 33765

Title: D ( ) Delete  
Name: COYNER, ERIC  
Address: 11551 119TH TERRACE NO.  
City-St-Zip: LARGO, FL 33778

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

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: WARD JOHANSEN

T

03/25/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date