## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#766574** 

FILED Apr 30, 2007 Secretary of State

Entity Name: ROTARY CLUB OF HOMOSASSA SPRINGS, FLORIDA, U.S.A., INC.

**Current Principal Place of Business: New Principal Place of Business: LUIGIS PIZZA** 4538 S. SUNCOAST BLVD. HOMOSASSA, FL 34446 **New Mailing Address: Current Mailing Address:** ROTARY CLUB OF HOMOSASSA SPRINGS P. O. BOX 2029 HOMOSASSA SPRINGS, FL 344472029 US FEI Number: 59-2543379 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NAST, CHRISTOPHER C. 263 E. REHILL ST. LECANTO, FL 34467 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition JONES, IVAN Name: Name: 94 SOUTH OAK VILLAGE BLVD Address: Address: City-St-Zip: HOMOSASSA, FL 34446 City-St-Zip: Title: ( ) Delete Title: () Change () Addition ADAMS, MICHELE Name: Name: Address: 2345 S COLEMAN AVE Address: City-St-Zip: HOMOSASSA, FL 34448 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition SAMSTAG, MAUREEN M SAMSTAG, MAUREEN M Name: Name: 6276 GROVER CLEVELAND BLVD 726W COLBERT CT Address: Address: City-St-Zip: HOMOSASSA, FL 34446 City-St-Zip: BEVERLY HILLS, FL 34465 Title: ( ) Delete Title: () Change () Addition Name: MACKLER, GREGG Name: Address: 2344 S COLEMAN Address: City-St-Zip: HOMOSASSA, FL 34448 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition BUTIN BIK, STEFAN BUTIN BIK, STEFAN Name: Name: 2195 W CHRISTINE LANE 2195 W CHRISTINE LANE Address: Address: City-St-Zip: LECANTO, FL 34461 City-St-Zip: LECANTO, FL 34461 Title: () Delete Title: (X) Change ( ) Addition BOWMAN, DAVID BOWMAN, DAVID Name: Name: Address: 1300 SUNTURF STREET Address: 1300 SUNTURF STREET LECANTO, FL 34461 LECANTO, FL 34461 City-St-Zip: 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: MAUREEN SAMSTAG S 04/30/2007