


**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Feb 04, 2004 8:00 am
Secretary of State

02-04-2004 90027 041 ****61.25

DOCUMENT # 766832					
1. Entity Name THE ROTARY CLUB OF WEST BRADENTON, INC.					
Principal Place of Business 8008 19TH AVE DR W BRADENTON FL 34209 US			Mailing Address P.O. BOX 1671 BRADENTON FL 34206 US		
2. Principal Place of Business 1301 LTH AVE W		3. Mailing Address			
Suite, Apt. #, etc. 600		Suite, Apt. #, etc.			
City & State B RADENTON FL		City & State		4. FEI Number 59-2282766	
Zip 34205		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HAMMER, JAMES L. 8008-19TH AVE.DR.W. BRADENTON FL 34209			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 9411 SARAZEN PL City PALMETTO FL Zip Code 34221		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW: FEE IS \$61.25 Due By May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D DIAMOND, BILL 216 20TH STREET W BRADENTON FL 34205	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	P REED, SCOTT 2808 60TH AVE W #1002 BRADENTON FL 34207-4309	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P STICHT, MARK 1665 LAUREL STREET SARASOTA FL 34236	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MARTIN, LEE 6012 9TH AVE W BRADENTON FL 34209	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T HAMMER, JIM 8008 19TH AVE DR W BRADENTON FL 34209	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MYERS, JOE 101 40TH ST CT NW BRADENTON FL 34209	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D O'BRIEN, TOM 2328 MANATEE AVE W BRADENTON FL 34205	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CASTNER, WILBUR 4209 PRO AM AVE E BRADENTON FL 34203	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LATHAN, MARK 13520 2ND AVE N.E. BRADENTON FL 34202	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MELTON, JOHN 204 77TH ST. W. BRADENTON FL 34209	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	XXXXXXXXXX	<input type="checkbox"/> Delete			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 attachment with an address, with all other like empowered.					
SIGNATURE: <u>JAMES L HAMMER</u> JAMES L HAMMER 1/25/04 9417474483					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					