

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 08, 2008 8:00 am**  
**Secretary of State**

02-08-2008 90036 048 \*\*\*\*61.25

**DOCUMENT # 769014**

1. Entity Name

THE ROTARY CLUB OF TAMPA FOUNDATION, INC.



Principal Place of Business

806 E. JACKSON ST.  
TAMPA FL 33602  
US

Mailing Address

PO BOX 172056  
TAMPA FL 33672



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E037 (10/07)

City & State

City & State

4. FEI Number

59-2445906

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THOMAS, LINDA  
806 E. JACKSON ST.  
TAMPA FL 33602

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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 is required when reappointing)

DATE

**FILE NOW - FEE IS \$61.25**  
**Due By May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$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 D ☒ Delete  
NAME TURNER, J. ARTHUR III  
STREET ADDRESS 220 BLANCA AVE  
CITY- ST- ZIP TAMPA FL 33606

TITLE D ☐ Change ☒ Addition  
NAME RAYMOND F. SANDELLI  
STREET ADDRESS 5031 WESLEY DR  
CITY- ST- ZIP TAMPA FL 33647

TITLE D ☐ Delete  
NAME OELLERICH, DAVID E  
STREET ADDRESS 448 LUCERNE  
CITY- ST- ZIP TAMPA FL 33606

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE D ☐ Delete  
NAME DEPURY, CHARLES B  
STREET ADDRESS 1007 S. STERLING AVE  
CITY- ST- ZIP TAMPA FL 33629

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE D ☐ Delete  
NAME GILLEN, WILLIAM A JR  
STREET ADDRESS 371 CHANNELSIDE WALK WAY # 1504  
CITY- ST- ZIP TAMPA FL 336021

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE D ☐ Delete  
NAME SEBASTIAN, WENDALL A  
STREET ADDRESS 306 INNER HARBOR CIRCLE  
CITY- ST- ZIP TAMPA FL 33602

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition  
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 Section 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 attachment with an address with all other like empowered.

SIGNATURE: *Wendall A. Sebastian*

1/29/08 813-223-3384