2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000001155

FILED Jan 08, 2009 Secretary of State

Entity Name: THE ROTARY CLUB OF SEBASTIAN RECREATION FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2019 E. LAKEVIEW DR. 13600 US HWY 1 SEBASTIAN, FL 32958 US

SUITE # 15

SEBASTIAN, FL 32958 US

Current Mailing Address: New Mailing Address:

P O BOX 781783

SEBASTIAN, FL 32978 US

FEI Number: 59-3608178 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:

WOODWARD, KRISTIE WOODWARD, KRISTIE 689 BARBER ST 13600 US HWY 1

SEBASTIAN, FL 32958 US SUITE#15 SEBASTIAN, FL 32958 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: 01/08/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

FALZONE, JOE TYSON, JOEL Name: Name: 814 ROBIN LANE Address: 22 N MULBERRY ST Address: City-St-Zip: SEBASTIAN, FL 32958 City-St-Zip: FELLSMERE, FL 32948

Title: () Delete Title: () Change () Addition

PINSON, CHRISTOPHER M Name: Name: Address: 9266-106TH AVE Address: City-St-Zip: VERO BEACH, FL 32967 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

WOODWARD, KRISTIE Name: WOODWARD, KRISTIE Name: Address: 689 BARBER ST Address: 13600 US HWY 1 City-St-Zip: SEBASTIAN, FL 32958 City-St-Zip: SEBASTIAN, FL 32958

Title: SD () Delete Title: () Change () Addition

Name: MASTERS, CHRISTY Name: Address: 1023 KENMORE ST Address: City-St-Zip: PALM BAY, FL 32907 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: KRISTIE WOODWARD TD 01/08/2009