

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 27, 2007 8:00 am**  
**Secretary of State**

08-27-2007 90034 024 \*\*\*\*61.25

<b>DOCUMENT # N00000006634</b>					
<b>1. Entity Name</b> THE ROTARY CLUB OF ANNA MARIA ISLAND INC.					
<b>Principal Place of Business</b> 5313 GOLF DRIVE HOLMES BEACH, FL 34217			<b>Main Address</b> 5313 GOLF DRIVE HOLMES BEACH, FL 34217		
<b>2. Principal Place of Business - No P.O. Box #</b> 5312 MARINA DR			<b>3. Mailing Address</b> P.O. BOX 1344		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
<b>City &amp; State</b> HOLMES BEACH FL		<b>City &amp; State</b> HOLMES BEACH FL		<b>4. FEI Number</b> 59-6209578	
<b>Zip</b> 34217		<b>Country</b> MANATEE		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b> CREED THOMAS 106 49TH STREET HOLMES BEACH, FL 34217		<b>7. Name and Address of New Registered Agent</b>			
		<b>Name</b> MISNER, EDWARD			
		<b>Street Address (P.O. Box Number is Not Acceptable)</b> 738 JACARANDA RD			
		<b>P.O. BOX</b> 4335			
		<b>City</b> ANNA MARIA		<b>FL</b> <b>Zip Code</b> 34216	
<b>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.</b>					
<b>SIGNATURE</b>		<b>EDWARD MISNER</b>		<b>8/22/07</b>	
Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating)		DATE	
<b>Filing Fee is \$61.25</b> <b>Due by September 14, 2007</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
<b>TITLE</b> D	<b>NAME</b> SCHLUETER, STEPHEN		<b>TITLE</b> PRES	<b>NAME</b> SCHLUETER, PAM	
<b>STREET ADDRESS</b>	603 MILL RUN EAST		<b>STREET ADDRESS</b>	603 MILL RUN EAST	
<b>CITY-ST-ZIP</b>	BRADENTON, FL 34212		<b>CITY-ST-ZIP</b>	BRADENTON, FL 34212	
<b>TITLE</b> P	<b>NAME</b> SESTERHENN, BIRGIT		<b>TITLE</b> SECRETARY	<b>NAME</b>	
<b>STREET ADDRESS</b>	5312 MARINA DRIVE		<b>STREET ADDRESS</b>	→	
<b>CITY-ST-ZIP</b>	HOLMES BEACH, FL 34217		<b>CITY-ST-ZIP</b>	→	
<b>TITLE</b> TD	<b>NAME</b> ED. MISNER		<b>TITLE</b> TREAS	<b>NAME</b>	
<b>STREET ADDRESS</b>	738 JACARANDA P.O. BOX 4335		<b>STREET ADDRESS</b>	→	
<b>CITY-ST-ZIP</b>	ANNA MARIA, FL 34216		<b>CITY-ST-ZIP</b>	→	
<b>TITLE</b> D	<b>NAME</b> FERNALD, DONALD		<b>TITLE</b> VP	<b>NAME</b> WINTON, DOUGLAS	
<b>STREET ADDRESS</b>	401 75TH STREET		<b>STREET ADDRESS</b>	P.O. BOX 1317	
<b>CITY-ST-ZIP</b>	HOLMES BEACH, FL 34217		<b>CITY-ST-ZIP</b>	ANNA MARIA, FL 34216	
<b>TITLE</b> D	<b>NAME</b> DUNNE, JAMES		<b>TITLE</b>	<b>NAME</b>	
<b>STREET ADDRESS</b>	6400 FLOTTILLA DR		<b>STREET ADDRESS</b>	→	
<b>CITY-ST-ZIP</b>	HOLMES BEACH, FL 34217		<b>CITY-ST-ZIP</b>	→	
<b>TITLE</b> VP	<b>NAME</b> JOHN, LUCKOWEC		<b>TITLE</b>	<b>NAME</b>	
<b>STREET ADDRESS</b>	11201 VERANDA		<b>STREET ADDRESS</b>	→	
<b>CITY-ST-ZIP</b>	BRADENTON, FL 34209		<b>CITY-ST-ZIP</b>	→	
<b>12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.</b>					
<b>SIGNATURE:</b>			<b>8/22/07 941-778-8585</b>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		
<b>EDWARD MISNER TREAS</b>					

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