

# 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N01000004307

FILED  
Jan 10, 2007  
Secretary of State

**Entity Name:** WINTER HAVEN ROTARY FOUNDATION, INC.

**Current Principal Place of Business:**

FLOYD & SAMMONS, PA  
1552 SIXTH STREET SE  
WINTER HAVEN, FL 338804509

**New Principal Place of Business:**

**Current Mailing Address:**

FLOYD & SAMMONS, PA  
1552 SIXTH STREET SE  
WINTER HAVEN, FL 338804509

**New Mailing Address:**

WINTER HAVEN ROTARY  
P.O. BOX 484  
WINTER HAVEN, FL 33882

**FEI Number:** 59-3726297      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

SAMMONS, ROBERT O  
1556 SITH ST SE  
WINTER HAVEN, FL 33880      US

**Name and Address of New Registered Agent:**

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: ROBERT O. SAMMONS

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: SAMMONS, ROBERT O  
Address: 1556 SIXTH ST SE  
City-St-Zip: WINTER HAVEN, FL 33880

Title: D      (X) Delete  
Name: PECK, MARYLY V  
Address: 1290 HOWARD TERRACE NW  
City-St-Zip: WINTER HAVEN, FL 338813158

Title: T      ( ) Delete  
Name: WADDELL, ALLEN  
Address: 251 AVE. A, SW  
City-St-Zip: WINTER HAVEN, FL 33883

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ALLEN WADDELL

T

01/10/2007

Electronic Signature of Signing Officer or Director

Date