2008 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # N01000004307 1. Entity Name WINTER HAVEN ROTARY FOLINDATION INC.



FILED

Apr 17, 2008 8:00 am Secretary of State 04-17-2008 90037 011 ****61.25

VVIIVIER	HAVEN KOTAKT FOUNDA	4110N, INO.					
Principal Place of Business FLOYD & SAMMONS, PA 1552 SIXTH STREET SE WINTER HAVEN, FL 33880-4509		Mailing Address WINTER HAVEN ROTARY P.O. BOX 484 WINTER HAVEN, FL 33882			 	MII Bibab Hini be ihi (bi	NINI SI IBBI
2. Principal P	Place of Business - No P.O. Box #	3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01082008	Chg-NP CR2	E037 (12/06)	
City & State		City & State		4. FEI Number 59-3726	 297	⊢	oplied For ot Applicable
Zip	Country	Zip	Country	5. Certificate of		\$8.75 Add	litional
	6. Name and Address of Current	Registered Agent		7. Name and A	ddress of New Register	red Agent	
			Name				-
SAMMONS, ROBERT O 1556 SITH ST SE			Street Ad	dress (P.O. Box Number	is Not Acceptable)		
WINIERF	HAVEN, FL 33880						
·			City			FL Zip Cod	e
8. The above	e named entity submits this statement for	or the purpose of changing its re	eaistered office or r	registered agent, or both.	in the State of Florida. I	am familiar with	and accept
	tions of registered agent.	pp gg	9.0.0.00	ogiotorea again, er coun	The state of the state of		aa accopt
SIGNATURE.							
	Signature, typed or printed name of registered agent	t and title if applicable. (NOTE:	Registered Agent signature	e required when reinstating)	DA	ATE .	
	Filing Fee is \$61.25 Due by May 1, 2008	9. Election Camp Trust Fund Co	paign Financing	\$5.00 May Be Added to Fees	Make cl	neck payable to	o
10.	Filing Fee is \$61.25	9. Election Camp Trust Fund Co	paign Financing	\$5.00 May Be Added to Fees	Make cl	neck payable to partment of S	100
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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 entricated 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:

04/23/08 (863) Z99 - 3522 Date Dayline Prone #