

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004738

FILED
Jan 06, 2007
Secretary of State

Entity Name: THE ROTARY CLUB OF FORT LAUDERDALE NORTH, INC.

Current Principal Place of Business:

224 COMMERCIAL BLVD, STE 310
LAUDERDALE-BY-THE-SEA, FL 333084443

New Principal Place of Business:

Current Mailing Address:

BOX 5872
FT LAUDERDALE, FL 333105872 58

New Mailing Address:

BOX 5872
FT LAUDERDALE, FL 333105872

FEI Number: 56-2300069

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, LOUIS C ESQ.
224 COMMERCIAL BLVD, STE 310
LAUDERDALE-BY-THE-SEA, FL 333084443 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: GREENBERG, BRYAN MR.
Address: 2151 BOCA RATON BLVD, SUITE 100
City-St-Zip: BOCA RATON,, FL 33431

Title: D () Delete
Name: BERNS, ANDY MR.
Address: 1000 W MCNAB ROAD, #206
City-St-Zip: POMPANO BEACH, FL 33069

Title: PD () Delete
Name: MORRIS, SHEILA MRS
Address: 1682 EAST OAKLAND PARK BLVD
City-St-Zip: FT LAUDERDALE, FL 33334

Title: SD (X) Delete
Name: BROMFIELD, DONNA MRS
Address: 2220 INTERCOASTAL DRIVE
City-St-Zip: FT LAUDERDALE, FL 33305

Title: VPD (X) Delete
Name: MCCracken, ROBERT J MR.
Address: 4301 NORTH FEDERAL HIGHWAY
City-St-Zip: OAKLAND PARK, FL 33308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MCCracken, ROBERT J
Address: 4301 N FEDERAL HWY
City-St-Zip: OAKLAND PARK, FL 33308

Title: SD (X) Change () Addition
Name: LINDFIELD, CHRISTINE
Address: 5100 N OCEAN BLVD APT 909
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: TD (X) Change () Addition
Name: BROMFIELD, DONNA
Address: 2220 INTRACOASTAL DR
City-St-Zip: FORT LAUDERDALE, FL 33308

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: DONNA BROMFIELD

TD

01/06/2007

Electronic Signature of Signing Officer or Director

Date