

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2004 8:00 am
Secretary of State

04-09-2004 90045 007 ****61.25

DOCUMENT # N02000006438

1. Entity Name
FOUR TOWNS ROTARY CLUB, INC.



Principal Place of Business
**1750 SOUTH VOLUSIA AVENUE
ORANGE CITY, FL 32763**

Mailing Address
**1750 SOUTH VOLUSIA AVENUE
ORANGE CITY, FL 32763**

24038994



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03232004 Chg-NP CR2E037 (10/03)

4. FEI Number
41-2059081

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HARDESTY, ALONZO H III
1750 SOUTH VOLUSIA AVENUE
ORANGE CITY, FL 32724**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME NORTHEY, PAT
STREET ADDRESS 2310 CARSON LANE
CITY-ST-ZIP DELTONA, FL 32725

TITLE SD ☐ Delete
NAME FULTON, PATRICK
STREET ADDRESS 145 SOUTH HWY 17-92
CITY-ST-ZIP DEBARY, FL 32713

TITLE TD ☐ Delete
NAME HARDESTY, ALONZO H III
STREET ADDRESS 1750 SOUTH VOLUSIA AVE., STE. 7
CITY-ST-ZIP ORANGE CITY, FL 32763

TITLE D ☐ Delete
NAME PEARCE, LESLIE
STREET ADDRESS 2015 NORTH NEMO DRIVE
CITY-ST-ZIP DELTONA, FL 32725

TITLE D ☐ Delete
NAME SUTO, DEBRA
STREET ADDRESS 51 MAIN STREET
CITY-ST-ZIP ENTERPRISE, FL 32725

TITLE D ☐ Delete
NAME DOLAN, TIM
STREET ADDRESS 1083 CROSS CUT WAY
CITY-ST-ZIP LONGWOOD, FL 32750

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☒ Change ☐ Addition
NAME NORTHEY, PAT
STREET ADDRESS 2310 Carson Lane
CITY-ST-ZIP Deltona, FL 32725

TITLE D ☒ Change ☐ Addition
NAME FULTON, PATRICK
STREET ADDRESS 145 South Hwy 17-92
CITY-ST-ZIP DeBary, FL 32713

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE PD ☒ Change ☐ Addition
NAME PEARCE, LESLIE
STREET ADDRESS 2015 North Nemo Drive
CITY-ST-ZIP Deltona, FL 32725

TITLE SD ☒ Change ☐ Addition
NAME SUTO, DEBRA
STREET ADDRESS 51 Main Street
CITY-ST-ZIP Enterprise, FL 32725

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 or other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

A. H. Hardesty, III, Treasurer

Date

Daytime Phone #

386-775-3222