2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000006438

FILED Oct 16, 2009 Secretary of State

Certificate of Status Desired ()

Entity Name: ROTARY CLUB OF FOUR TOWNES/ORANGE CITY, INC.

Current Principal Place of Business: New Principal Place of Business:

1750 SOUTH VOLUSIA AVENUE 27 SO CHARLES RICHARD BEALL BLVD

SUITE 7 DEBARY, FL 32713 ORANGE CITY, FL 32763

New Mailing Address: Current Mailing Address:

27 SO CHARLES RICHARD BEALL BLVD 1750 SOUTH VOLUSIA AVENUE

SUITE 7 DEBARY, FL 32713 US ORANGE CITY, FL 32763

FEI Number: 41-2059081 FEI Number Applied For () FEI Number Not Applicable ()

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: Name and Address of New Registered Agent:

HARDESTY, ALONZO H III GIGANTINO, BETTY G 1750 SOUTH VOLUSIA AVENUE 27 SO CHARLES RICHARD BEALL BLVD

SUITE 7 DEBARY, FL 32713 US ORANGE CITY, FL 32724 US

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: BETTY GIGANTINO 10/16/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

T/D () Delete (X) Change () Addition

OHERRON, JANET GIGANTINO, BETTY Name: Name: 3091 LYNNHAVEN ST Address: 27 SO CHARLES RICHARD BEALL BLVD Address:

DEBARY, FL 32713 US City-St-Zip: DELTONA, FL 32738 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

Name: PEARCE, LESLIE Name: PEARCE, LESLIE Address: 2015 NORTH NEMO DRIVE Address: 2015 NORTH NEMO DRIVE City-St-Zip: DELTONA, FL 32725 City-St-Zip: DELTONA, FL 32725 US

Title: (X) Delete Title: () Change () Addition

NYSTRUM, DENISE Name: Name: Address: 711 ALBERT LANE Address: City-St-Zip: DELAND, FL 32720 City-St-Zip:

Title: (X) Delete Title: () Change () Addition

Name: AGUSTA, VINCENT Name: 600 DOLPHIN COVE Address: Address: City-St-Zip: DEBARY, FL 32713 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: BETTY GIGANTINO D 10/16/2009