

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 13, 2003 8:00 am
Secretary of State

02-13-2003 90224 008 ****61.25

DOCUMENT # N02000006438

1. Entity Name

FOUR TOWNES 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**



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

41-2059081

Applied For

Not Applicable

Zip

Country

Zip

Country

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

FILE NOW: FEE IS \$61.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

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

TITLE **D** ☐ Delete
NAME **HARDESTY, ALONZO H III**
STREET ADDRESS **1750 SOUTH VOLUSIA AVE**
CITY-ST-ZIP **ORANGE CITY FL 32763**

TITLE **T/D** ☒ Change ☐ Addition
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** ☐ Change ☒ Addition
NAME **DOLAN, TIM**
STREET ADDRESS **1083 Cross Cut Way**
CITY-ST-ZIP **Longwood, FL 32750**

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

TITLE **D** ☐ Change ☒ Addition
NAME **RITCHEY, JEFF**
STREET ADDRESS **1859 Providence Blvd.**
CITY-ST-ZIP **Deltona, FL 32725**

TITLE **D** ☒ Delete
NAME **OATMAN, MARY LOU**
STREET ADDRESS **1510 E. SILVER HAMMOCK**
CITY-ST-ZIP **DELAND FL 32725**

TITLE **D** ☐ Change ☒ Addition
NAME **CARMICHEL, ALEX IV**
STREET ADDRESS **112 Balmoral Court**
CITY-ST-ZIP **DeBary, FL 32713**

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 all other like empowered.

SIGNATURE:

SIG [Signature]

2-5-03 386 775-3222

CR2E037 (10/02)

ATTACHMENT

UBR 2003

FOUR TOWNES ROTARY CLUB, INC.

Block 10: Additions Continued

D

BRIDGEMAN, DAVID

P. O. Box 741660

Orange City, FL 32774

D

SHAPEROW, ELI

793 E. Normandy Blvd.

Deltona, FL 32725

30035643

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