

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007484

FILED  
Feb 17, 2009  
Secretary of State

Entity Name: THE LABELLE ROTARY CLUB, INC.

## Current Principal Place of Business:

PO BOX 3043  
LABELLE, FL 33975

## New Principal Place of Business:

150 S MAIN ST  
SUITE 1  
LABELLE, FL 33935

## Current Mailing Address:

PO BOX 1466  
LABELLE, FL 33975

## New Mailing Address:

FEI Number: 20-1460644      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HIGGINBOTHAM, ANDREW  
150 S. MAIN ST. STE 1  
LABELLE, FL 33975      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: D ( ) Delete  
Name: KARAU, MEL  
Address: 5190 FT. DENAUD ROAD  
City-St-Zip: LABELLE, FL 33935

Title: D ( ) Delete  
Name: GUNTER, GREG  
Address: 575 S. MAIN ST  
City-St-Zip: LABELLE, FL 33935

Title: VP ( ) Delete  
Name: NELSON, KEVIN  
Address: 150 S. MAIN ST  
City-St-Zip: LABELLE, FL 33935

Title: P ( ) Delete  
Name: LAPP, MARK  
Address: 202 N CYPRESS ST.  
City-St-Zip: LABELLE, FL 33935

Title: T ( ) Delete  
Name: BRUNETO, MICHELLE  
Address: 1990 CHRBLINS RD.  
City-St-Zip: LABELLE, FL 33975

Title: D ( ) Delete  
Name: BHAGWANDIN, RARI  
Address: PO BOX 685  
City-St-Zip: LABELLE, FL 33975

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P (X) Change ( ) Addition  
Name: NELSON, KEVIN  
Address: 150 S. MAIN ST  
City-St-Zip: LABELLE, FL 33935

Title: D (X) Change ( ) Addition  
Name: LAPP, MARK  
Address: 202 N CYPRESS ST.  
City-St-Zip: LABELLE, FL 33935

Title: T (X) Change ( ) Addition  
Name: BRUNETTO, MICHELLE  
Address: 1990 CHRBLINS RD.  
City-St-Zip: LABELLE, FL 33975

Title: S (X) Change ( ) Addition  
Name: HILL, SUSAN  
Address: P O BOX 697  
City-St-Zip: LABELLE, FL 33975

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: MARK LAPP

D

02/17/2009

Electronic Signature of Signing Officer or Director

Date