

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02837

FILED
Aug 03, 2004
Secretary of State**Entity Name:** LAKELAND CHRISTINA ROTARY CLUB, INC.**Current Principal Place of Business:**2249 EASTMEADOWS COURT
LAKELAND, FL 33813 US**New Principal Place of Business:**2318 EASTMEADOWS ROAD
LAKELAND, FL 33813 US**Current Mailing Address:**2249 EASTMEADOWS COURT
LAKELAND, FL 33813 US**New Mailing Address:**2318 EASTMEADOWS ROAD
LAKELAND, FL 33813 US**FEI Number:** 59-2403055**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**WORKMAN, MICHAEL E
CLARK, CAMPBELL, & MAWHINNEY
500 SOUTH FLORIDA AVENUE -SUITE 800
LAKELAND, FL 33801 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:** DV () Delete
Name: LINEBERGER, BARBARA
Address: 685 LAKE CIRCLE PLACE
City-St-Zip: LAKELAND, FL 33813**Title:** DP () Delete
Name: MORT, GEORGE
Address: 2249 EASTMEADOWS COURT
City-St-Zip: LAKELAND, FL 33813**Title:** DPE () Delete
Name: WORKMAN, MICHAEL
Address: 2318 EASTMEADOWS ROAD
City-St-Zip: LAKELAND, FL 33813**Title:** DS () Delete
Name: HAND, DAVID
Address: 632 OAK DRIVE WEST
City-St-Zip: LAKELAND, FL 33803**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** DPE (X) Change () Addition
Name: HOYER, ERIC
Address: 2204 VELVET WAY
City-St-Zip: LAKELAND, FL 33811**Title:** DV (X) Change () Addition
Name: MORT, GEORGE
Address: 2249 EASTMEADOWS COURT
City-St-Zip: LAKELAND, FL 33813**Title:** DP (X) Change () Addition
Name: WORKMAN, MICHAEL
Address: 2318 EASTMEADOWS ROAD
City-St-Zip: LAKELAND, FL 33813**Title:** DS (X) Change () Addition
Name: CHAPMAN, STEPHEN
Address: 126 ELM SQUARE S
City-St-Zip: LAKELAND, FL 33813**Title:** DT () Change (X) Addition
Name: DAVID, TIM
Address: 62 WOODHALL DRIVE
City-St-Zip: MULBERRY, FL 33860

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MICHAEL E. WORKMAN

DP

08/03/2004

Electronic Signature of Signing Officer or Director

Date