

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 18, 2005 8:00 am
Secretary of State

03-18-2005 90056 021 ****61.25

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1. Entity Name
ROTARY CLUB OF BOCA RATON SUNSET, INC.



Principal Place of Business
C/O BLOCH MINERLEY & FEIN PL
980 NORTH FEDERAL HIGHWAY SUITE 412
BOCA RATON, FL 33432

Mailing Address
C/O BLOCH MINERLEY & FEIN PL
980 NORTH FEDERAL HIGHWAY SUITE 412
BOCA RATON, FL 33432



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01172005 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
80-0122897

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

SIEGEL, BARRY D
2385 EXECUTIVE CENTER DR
SUITE 100
BOCA RATON, FL 33431

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

(Signable, typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when for standing)

DATE

Filing Fee is \$61.25
Due by May 1, 2005

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 PERMAN, STEVEN M
STREET ADDRESS 20401 STATE ROAD 7 #G-10
CITY-ST-ZIP BOCA RATON, FL 33498

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

TITLE D ☐ Delete
NAME LUSTIG, PHIL III
STREET ADDRESS 9937 MAJORCA PLACE
CITY-ST-ZIP BOCA RATON, FL 33434

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

TITLE D ☐ Delete
NAME SIEGEL, BARRY
STREET ADDRESS 2355 EXECUTIVE CENTER DR SUITE 100
CITY-ST-ZIP BOCA RATON, FL 33431

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

TITLE D ☐ Delete
NAME CATOGGIO, CHRISTINE
STREET ADDRESS 10437 BOW CT
CITY-ST-ZIP BOCA RATON, FL 33498

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

TITLE D ☐ Delete
NAME HEIZER, DOUGLAR
STREET ADDRESS 6198 MIZER LANE
CITY-ST-ZIP BOCA RATON, FL 33433

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

TITLE D ☐ Delete
NAME MIRRIIONE, JOSEPH
STREET ADDRESS PO BOX 810775
CITY-ST-ZIP BOCA RATON, FL 33481

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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/14/05 561-929-1968
Date Daytime Phone #