


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2006 8:00 am
Secretary of State

02-27-2006 90049 026 ****61.25

DOCUMENT # N03000001089		
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
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2. Principal Place of Business c/o Covert Siegel LLP Suite, Apt. #, etc. 2385 EXECUTIVE CENTER DR, SUITE 100	3. Mailing Address c/o Covert Siegel LLP Suite, Apt. #, etc. 2385 EXECUTIVE CENTER DR, SUITE 100
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City & State Boca Raton, FL	City & State Boca Raton, FL
Zip 33431	Country USA



1252006 Chg-NP CR2E037 (11/05)

4. FEI Number 80-0122897		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent SIEGEL, BARRY D 2385 EXECUTIVE CENTER DR SUITE 100 BOCA RATON, FL 33431		7. Name and Address of New Registered Agent 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] (NOTE: Registered Agent signature required when reinstating) DATE 2/20/2006

Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PERMAN, STEVEN M 20401 STATE ROAD 7 #G-10 BOCA RATON, FL 33498 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LUSTIG, PHIL III 9937 MAJORCA PLACE BOCA RATON, FL 33434 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SIEGEL, BARRY 2355 EXECUTIVE CENTER DR SUITE 100 BOCA RATON, FL 33431 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CATOGGIO, CHRISTINE 10437 BOW CT BOCA RATON, FL 33498 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HEIZER, DOUGLAR 8198 MIZER LANE BOCA RATON, FL 33433 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MIRRIONE, JOSEPH PO BOX 810775 BOCA RATON, FL 33481 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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] DATE 2/20/2006

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR