## 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N03000001825

Entity Name: ROTARY CLUB OF TAVARES, FLORIDA, INC.

FILED Nov 01, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

TAVARES, FL 32778

**Current Mailing Address: New Mailing Address:** 

**BOX 850** 

TAVARES, FL 32778

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ELMORE, JERRY 4850 MAŔSH HARBOR DR TAVARES, FL 32778

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: JERRY D. ELMORE

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete

SEAWELL, TERRY THOMAS, NORBERT Name: Name:

BOX 850 Address: **BOX 850** Address:

City-St-Zip: TAVARES, FL 32778 City-St-Zip: TAVARES, FL 32778

Title: VΡ Title: VΡ (X) Change ( ) Addition ( ) Delete

THOMAS, NORBERT Name: SARGENT, REBECCA Name: Address: **BOX 850** Address: **BOX 850** 

City-St-Zip: TAVARES, FL 32778 City-St-Zip: TAVARES, FL 32778

Title: TS () Delete Title: () Change () Addition

ELMORE, JERRY Name: Name:

Address: BOX 850 Address: City-St-Zip: TAVARES, FL 32778 City-St-Zip:

Title: SEC () Delete Title: SEC (X) Change ( ) Addition

Name: SARGENT, REBECCA Name: ELMORE, JERRY D Address: **BOX 850** Address: **BOX 850** City-St-Zip: TAVARES, FL 32778 City-St-Zip: TAVARES, FL 32778

Title: () Delete Title: (X) Change ( ) Addition

ALEXANDER, MIKE MCGINLEY, COLLEEN Name: Name: BOX 850 BOX 850

Address: Address: City-St-Zip: TAVARES, FL 32778 City-St-Zip: TAVARES, FL 32778

Title: () Delete Title: (X) Change ( ) Addition

GREGORY, JEFF SEAWELL, TERRY Name: Name:

BOX 850 Address: Address: **BOX 850** TAVARES, FL 32778 TAVARES, FL 32778 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JERRY D. ELMORE TS 11/01/2006