

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004757

FILED
Jan 12, 2009
Secretary of State

Entity Name: ROTARY CLUB OF LEESBURG-SUNSET, INC.

Current Principal Place of Business:

POST OFFICE BOX 490626
LEESBURG, FL 347490626

New Principal Place of Business:

429 WEST MAGNOLIA STREET
LEESBURG, FL 34748

Current Mailing Address:

POST OFFICE BOX 490626
LEESBURG, FL 347490626

New Mailing Address:

FEI Number: 59-2757881

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POPE, WILLIAM A JR
35542 DOGWOOD DRIVE
FRUITLAND PARK, FL 34731 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: P () Delete
Name: BOWERSOX, ROBERT
Address: 2001 SOUTH STREET
City-St-Zip: LEESBURG, FL 34748

Title: PP () Delete
Name: SMITH, LEON
Address: 3333 N. HWY 441/27
City-St-Zip: FRUITLAND PARK, FL 34731

Title: SD () Delete
Name: POPE JR, WILLIAM A
Address: 35542 DOGWOOD DRIVE
City-St-Zip: FRUITLAND PARK, FL 34731

Title: T () Delete
Name: SMITH, ROBIN
Address: P.O. BOX 490336
City-St-Zip: LEESBURG, FL 347490336

Title: VP () Delete
Name: BOWERSOX, TED
Address: 20014 SOUTH STREET
City-St-Zip: LEESBURG, FL 34748

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BOWERSOX, TED
Address: 2001 SOUTH STREET
City-St-Zip: LEESBURG, FL 34748

Title: PP (X) Change () Addition
Name: BOWERSOX, ROBERT
Address: 2001 SOUTH STREET
City-St-Zip: LEESBURG, FL 34748

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

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

Title: VP (X) Change () Addition
Name: GRIFFIN, AMY
Address: P.O. BOX 492857
City-St-Zip: LEESBURG, FL 347492857

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: ROBIN M SMITH

T

01/12/2009

Electronic Signature of Signing Officer or Director

Date