

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006858

FILED
Apr 22, 2005
Secretary of State

Entity Name: FOUR TOWNES ROTARY CHARITABLE FOUNDATION, INC.

Current Principal Place of Business:

1750 SOUTH VOLUSIA AVENUE, SUITE 7
ORANGE CITY, FL 32763

New Principal Place of Business:

Current Mailing Address:

1750 SOUTH VOLUSIA AVENUE, SUITE 7
ORANGE CITY, FL 32763

New Mailing Address:

FEI Number: 20-1451140

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARDESTY, ALONZO H III
1750 SOUTH VOLUSIA AVENUE, SUITE 7
ORANGE CITY, FL 32763 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: PCD () Delete
Name: PEARCE, LESLIE
Address: 2015 NORTH NEMO DRIVE
City-St-Zip: DELTONA, FL 32763

Title: VCD () Delete
Name: RUNGE, KEN
Address: 1974 EAST COOPER DRIVE
City-St-Zip: DELTONA, FL

Title: SD () Delete
Name: SUTO-HENRY, DEBRA
Address: 101 LOUISE AVENUE
City-St-Zip: NEW SMYRNA BEACH, FL

Title: TD () Delete
Name: HARDESTY, ALONZO H III
Address: 1235 EAST FOWLER DRIVE
City-St-Zip: DELTONA, FL

Title: D () Delete
Name: NORTHEY, PATRICIA
Address: 2310 CARSON LANE
City-St-Zip: DELTONA, FL

Title: D () Delete
Name: PEARCE, RICHARD
Address: 2015 NORTH NEMO DRIVE
City-St-Zip: DELTONA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: AGUSTA, VINCE
Address: 600 DOLPHIN CT
City-St-Zip: DELTONA, FL

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

Title: TD (X) Change () Addition
Name: HARDESTY, ALONZO H III
Address: 1235 EAST FOWLER DRIVE
City-St-Zip: DELTONA, FL 32725

Title: VCD (X) Change () Addition
Name: NORTHEY, PATRICIA
Address: 2310 CARSON LANE
City-St-Zip: DELTONA, FL

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

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: ALONZO H HARDESTY, III

TD

04/22/2005

Electronic Signature of Signing Officer or Director

Date