

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008905

FILED
Feb 12, 2007
Secretary of State

Entity Name: PEMBROKE PINES ROTARY CLUB INC

Current Principal Place of Business:

P.O. BOX 163
2114 N FLAMINGO DR
PEMBROKE PINES, FL 33028

Current Mailing Address:

P.O. BOX 163
2114 N FLAMINGO DR
PEMBROKE PINES, FL 33028

New Principal Place of Business:

1601 N PALM AVE
301A
PEMBROKE PINES, FL 33028

New Mailing Address:

2114 N FLAMINGO DR
163
PEMBROKE PINES, FL 33028

FEI Number: 20-3390672

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TURCHEN, SKIP
12555 ORANGE DR
103
DAVIE, FL 33330 US

Name and Address of New Registered Agent:

TURCHEN, SKIP
1601 N PALM AVE
301A
PEMBROKE PINES, FL 33026 US

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: H.N. TURCHEN

02/12/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LEVY, RUBEN
Address: 12663 N.W. 18 MANOR
City-St-Zip: PRMBROKE PINES, FL 33028

Title: VP () Delete
Name: CORREDOR, LIGIA
Address: 16417 SAPPHERE BEND
City-St-Zip: WESTON, FL 33331

Title: S () Delete
Name: VINTEJOUX, PIERRE
Address: 880 ANSLEY CT
City-St-Zip: WESTON, FL 33326

Title: T () Delete
Name: TURCHEN, SKIP
Address: 12555 ORANGE DR 103
City-St-Zip: DAVIE, FL 33330

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: TURCHEN, SKIP
Address: 1601 N PALM AVE 301A
City-St-Zip: PEMBROKE PINES, FL 333026

Title: T (X) Change () Addition
Name: VINTEJOUX, PIERRE
Address: 880 ANSLEY CT
City-St-Zip: WESTON, FL 33326

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: H.N.TURCHEN

TR

02/12/2007

Electronic Signature of Signing Officer or Director

Date