

**2007 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

DOCUMENT # N05000009653

1. Entity Name  
ROTARY CLUB OF DOWNTOWN DELAND, INC.



**FILED  
Jul 23, 2007 8:00 am  
Secretary of State**

04-27-2007 90218 012 \*\*\*150.00

66020548



|  |        |                 |                |
|--|--------|-----------------|----------------|
| 02132007   | Chg-NP | CR2E037 (12/06) |                |
| 20-3580858   |        |                 | Applied For    |
| 4. FEI Number<br>APPLIED FOR   |        |                 | Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required |        |                 |                |
| 6. Name and Address of Current Registered Agent  |        |                 |                |
| Name: AUTRY, JERRY L<br>130 LAKE WINNEMISSETT DR<br>DELAND, FL 32724                     |        |                 |                |
| 7. Name and Address of New Registered Agent  |        |                 |                |
| Name:<br>Street Address (P.O. Box Number is Not Acceptable)<br>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, typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$81.25  
Due by May 1, 2007

9. Election Campaign Financing  
Trust Fund Contribution.  \$5.00 May Be  
Added to Fees

Make check payable to  
Florida Department of State

|  |   |   |   |
|--|---|---|---|
| 10. OFFICERS AND DIRECTORS                     |   | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>ANDERSON, DUANE<br>2345 WILMHURST RD<br>DELAND, FL 32720         | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | JERRY L. AUTRY, PRES<br>130 LAKE WINNEMISSETT DR                  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>BUDZINSKI, BILL<br>101 S MONTGOMERY ST<br>DELAND, FL 32720       | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | JOTHN CHENEY, D.<br>1250 Glen Royal Ter.<br>DeLand, FL 32720-2338 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>FRANCE, JIM<br>1730 TIMBER HILLS DR<br>DELAND, FL 32724          | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | BILL BUDZINSKI, D<br>101 S. MONTGOMERY ST.<br>DELAND, FL 32720    |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>REINECKE, ASHTON<br>114 CALLAWAY CT<br>DELAND, FL 32724          | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | SUSAN WOOSTER, D.<br>332. WEST MINNESOTA AVE<br>DELAND, FL 32720  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>GRAVER, ED<br>34301 PARKVIEW AVE<br>EUSTIS, FL 32726             | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>SURYNT, THEODORE DR<br>3350 BLACK BEAR TRAIL<br>DELAND, FL 32724 | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        |   |

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: *Duane Anderson*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TREASURER 42407386734441  
Date: 04-27-2007  
Daytime Phone #



**IRS** DEPARTMENT OF THE TREASURY  
INTERNAL REVENUE SERVICE  
P.O. BOX 9003  
HOLTSVILLE NY 11742-9003

## ATTACHMENT

66020548

x

004284.206349.0018.001 1 MB 0.309 702

Date of this notice: 10-17-2005

Employer Identification Number:  
20-3580858

Form: SS-4

Number of this notice: CP 575 E

ROTARY CLUB OF DOWNTOWN DELAND INC  
X JERRY L AUTRY  
PO BOX 1310  
DELAND FL 32721

For assistance you may call us at:  
1-800-829-4933

14284

IF YOU WRITE, ATTACH THE  
STUB OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an EIN. We assigned you EIN 20-3580858. This EIN will identify your business account, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, please use the label IRS provided. If that isn't possible you should use your EIN and complete name and address shown above on all federal tax forms, payments and related correspondence. If this information isn't correct, please correct it using the tear off stub from this notice. Return it to us so we can correct your account. If you use any variation of your name or EIN, doing so could cause a delay in processing and may result in incorrect information in your account. Doing so could result in our assigning you more than one EIN.

If you want to apply to receive a ruling or a determination letter recognizing your organization as tax exempt, and have not already done so, you should file Form 1023/1024, Application for Recognition of Exemption, with the IRS Ohio Key District Office. Publication 557, Tax Exempt Status for Your Organization, is available at most IRS offices and has details on how you can apply.

**IMPORTANT REMINDERS:**

- \* Keep a copy of this notice in your permanent records.
- \* Use this EIN and your name exactly as they appear on all your federal tax forms.
- \* Refer to this EIN on your tax related correspondence and documents.

Thank you for your cooperation.