

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006954

FILED  
Apr 09, 2007  
Secretary of State

**Entity Name:** ROTARY CLUB OF GAINESVILLE SUNRISE, INC.

**Current Principal Place of Business:**

4034 NW 62ND AVENUE  
GAINESVILLE, FL 32653

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 756  
GAINESVILLE, FL 32602

**New Mailing Address:**

**FEI Number:** 20-5633898

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHASE, JOSHUA C  
222 NE FIRST STREET  
GAINESVILLE, FL 32601 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: D ( ) Delete  
Name: VERKLER, JOHN  
Address: 5820 NW 62ND TERRACE  
City-St-Zip: GAINESVILLE, FL 32653

Title: D ( ) Delete  
Name: MASSMANN, RICK  
Address: 4481 SW 101ST DRIVE  
City-St-Zip: GAINESVILLE, FL 32608

Title: D ( ) Delete  
Name: MEDINA, RICK  
Address: P.O. BOX 14121  
City-St-Zip: GAINESVILLE, FL 32604

Title: D ( ) Delete  
Name: RELLA, BOB  
Address: 5915 NW 62ND TERRACE  
City-St-Zip: GAINESVILLE, FL 32604

Title: D ( ) Delete  
Name: CRAIF, ANA  
Address: 1717 NW 23RD AVENUE., UNIT 3A  
City-St-Zip: GAINESVILLE, FL 32605

Title: D (X) Delete  
Name: FARB, RON  
Address: 3424 SW 92ND ST  
City-St-Zip: GAINESVILLE, FL 32608

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: D (X) Change ( ) Addition  
Name: KENNEDY, HAL  
Address: 4034 NW 62ND AVENUE  
City-St-Zip: GAINESVILLE, FL 32653

Title: D (X) Change ( ) Addition  
Name: SCHMIDT, BILL  
Address: 3951 SW 98TH TERRACE  
City-St-Zip: GAINESVILLE, FL 32608

Title: D (X) Change ( ) Addition  
Name: GREMILLION, MACKEY  
Address: 922 NW 45TH TERRACE  
City-St-Zip: GAINESVILLE, FL 32605

Title: D (X) Change ( ) Addition  
Name: PALLAS, PAMELA J  
Address: 143 CYPRESSWOOD GLEN  
City-St-Zip: LAKE CITY, FL 32025

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 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: PAMELA J. PALLAS

D

04/09/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date