

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008638

FILED
Jun 06, 2008
Secretary of State

Entity Name: TREASURE COAST ROTARY CLUB OF VERO BEACH FOUNDATION, INC.

Current Principal Place of Business:

21 ROYAL PALM POINTE STE 100
VERO BCH, FL 32960

New Principal Place of Business:

Current Mailing Address:

PO BOX 1051
VERO BCH, FL 32961

New Mailing Address:

FEI Number: 20-5313685 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BLOCK, KATHRYN E
21 ROYAL PALM POINTE STE 100
VERO BCH, FL 32960 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DC () Delete
Name: SIGLER, GEORGE
Address: P.O.BOX 1051
City-St-Zip: VERO BCH, FL 32961

Title: DVC () Delete
Name: DARRESS, TODD
Address: P.O.BOX 1051
City-St-Zip: VERO BCH, FL 32961

Title: DS () Delete
Name: MORRIS, PATTI
Address: P.O.BOX 1051
City-St-Zip: VERO BCH, FL 32961

Title: DT () Delete
Name: CLETZER, ANGELA
Address: P.O.BOX 1051
City-St-Zip: VERO BCH, FL 32961

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: PRINGLE, PETER
Address: P.O.BOX 1051
City-St-Zip: VERO BCH, FL 32961

Title: DV (X) Change () Addition
Name: CARROLL, TRACY
Address: P.O.BOX 1051
City-St-Zip: VERO BCH, FL 32961

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

Title: DT (X) Change () Addition
Name: PARKS, SUSAN
Address: P.O.BOX 1051
City-St-Zip: VERO BCH, FL 32961

Title: D () Change (X) Addition
Name: BLOCK, KATHRYN E
Address: 21 ROYAL PALM PT, STE 100
City-St-Zip: VERO BEACH, FL 32960

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: KATHRYN E. BLOCK

D

06/06/2008

Electronic Signature of Signing Officer or Director

Date