

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012881

FILED
Jan 30, 2009
Secretary of State

Entity Name: BIG PINE AND LOWER KEYS ROTARY FOUNDATION, INC.

Current Principal Place of Business:

25000 OVERSEAS HWY
SUMMERLAND KEY, FL 33042

New Principal Place of Business:

25000 OVERSEAS HWY
SUMMERLAND KEY, FL 33042 MO

Current Mailing Address:

25000 OVERSEAS HWY
SUMMERLAND KEY, FL 33042

New Mailing Address:

25000 OVERSEAS HWY
SUMMERLAND KEY, FL 33042 MO

FEI Number: 26-0273202

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROHE, LEE R. ESQ.
25000 OVERSEAS HWY
SUMMERLAND KEY, FL 33042 US

Name and Address of New Registered Agent:

ROHE, LEE R ESQ.
25000 OVERSEAS HWY
SUMMERLAND KEY, FL 33042 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: LEE R. ROHE

01/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FIELDER, RICHARD
Address: 9 SHIPS WAY
City-St-Zip: BIG PINE KEY, FL 33043

Title: V () Delete
Name: TYCOLIZ, WILLIAM
Address: P.O. BOX 212
City-St-Zip: SUMMERLAND KEY, FL 33042

Title: S () Delete
Name: DARTLEY, KENNETH A
Address: 692 BLACKBEARD RD
City-St-Zip: LITTLE TORCH KEY, FL 33042

Title: T () Delete
Name: ROSASCO, PETER
Address: 25000 OVERSEAS HWY
City-St-Zip: SUMMERLAND KEY, FL 33042

Title: D () Delete
Name: NORMAN, DEREK
Address: 30677 OVERSEAS HWY
City-St-Zip: BIG PINE KEY, FL

Title: D () Delete
Name: SWINNEY, EDIE
Address: 25000 OVERSEAS HWY
City-St-Zip: SUMMERLAND KEY, FL 33042

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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: EDIE SWINNEY

D.

01/30/2009

Electronic Signature of Signing Officer or Director

Date