2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jan 19, 2006 8:00 am Secretary of State

DOCUMENT # N06120 1. Entity Name BRADENTON ROTARY FOUNDATION INCORPORATED						01	-19-2006 90	0074 005 ***	*70.00	
Principal Place of Business 601 12TH STREET WEST BRADENTON, FL 34205 PO BOX 551 BRADENTON, FL 34206										
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.				01052006 Cr	ng-NP	CR2E037 (11/	05)	
City & State		City & State		4. FEI Number 59-2480884				Applied For Not Applicable		
Žip	Country Zip C		Cour	ntry 5. Certificate of Status Desired			atus Desired	\$8.75 Additional Fee Required		
	6. Name and Address of Current	Registered Agent		Name		7. Name and Add	ress of New Re	egistered Agent		
	JOHN V ` STREET WEST ON, FL 34205		Street Addre			s (P.O. Box Number is Not Acceptable)				
			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										
Filing Fee is \$61.25 Due by May 1, 2006 9. Election Campaign F Trust Fund Contribut					· _ •••••					
10.	OFFICERS AND DIF		11.	1		DDITIONS/CHANGI				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FORBES, FRED 323 10TH AVE SUITE 104	Delete 💆		T ADDRESS 1.0	hee u	nt v. UnDegri 3rd AV W. Si dente, FC	Ct ,de600 20255	☐ Ch	ange XAddition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HITCHCOCK, KIM 14705 MCCORRADY ROAD BALM, FL 33503	☐ Delete	TITLE NAME STREE	FT ADDRESS 7	reside iuseum	en-Etect Afterta- 1016 Compación 1016 Key, FC	Road	☐ Ch	ange Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PARAT, STYHEN 1301 SIXTH AVENUE W #600 BRADENTON, FL 34205	Delete	TITLE NAME STREE	T	reasi			☐ Ch	ange Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete						☐ Ch	ange 🔲 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete						□ Ch	ange 🗌 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete						□ Ch	ange 🗌 Addition	
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: Le W. V. SIGNATURE AND TYPED OR PRINTED NAMED OF SIGNANG OFFICER OR DIRECTOR Date Dayline Phone #										

LET W. VANDERNIES