

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2007 08:00 AM
Secretary of State

DOCUMENT # N06120

1. Entity Name
BRADENTON ROTARY FOUNDATION INCORPORATED



Principal Place of Business
**601 12TH STREET WEST
BRADENTON, FL 34205**

Mailing Address
**PO BOX 551
BRADENTON, FL 34206**



01042007 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2480884	Applied For Not Applicable
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5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**QUINLAN, JOHN V
601 12TH STREET WEST
BRADENTON, FL 34205**

**DO NOT WRITE
IN THIS SPACE**

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 \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P VANDEGRIFT, LEE W 1001 3RD AVE W STE 600 BRADENTON, FL 34205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HITCHCOCK, KIM 14705 MCCORRADDY ROAD BALM, FL 33503
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T STUCK, JOHN 5712 9TH AVE DR, W. BRADENTON, FL 34209
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ATHERTON, SUSAN 771 OLD COMPASS RD LONGBOAT KEY, FL 34228
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000624265
02/14/07-80025-006 70.00

**DO NOT WRITE
IN THIS SPACE**

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:

Susan M. Atherton
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/15/07