

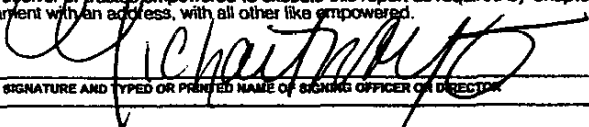


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2008 8:00 am
Secretary of State

04-10-2008 90016 040 ****61.25

DOCUMENT # N07000010328			
1. Entity Name ROTARY CLUB OF THE VILLAGES-SUNSET FOUNDATION, INC.			
Principal Place of Business 940 BRANTLEY STREET THE VILLAGES, FL 32162		Mailing Address PO BOX 484 OXFORD, FL 34484	
2. Principal Place of Business - No P.O. Box # 926 BRANTLEY		3. Mailing Address PO BOX 484	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State THE VILLAGES, FL		City & State OXFORD FL	
4. FEI Number 20-BB55485		Applied For Not Applicable	
Zip 32162	Country SUMTER	Zip 34484	Country SUMTER
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DEVRIES DENNY 940 BRANTLEY STREET THE VILLAGES, FL 32162		7. Name and Address of New Registered Agent Name ARTHUR C LUCIA Street Address (P.O. Box Number is Not Acceptable) 926 BRANTLEY City THE VILLAGES, FL Zip Code 32162	
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 		DATE 4/8/2008	
Filing Fee is \$81.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP DEVRIES DENNY 940 BRANTLEY STREET THE VILLAGES, FL 32162 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT - <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition ARTHUR C LUCIA 926 BRANTLEY THE VILLAGES FL 32162
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT HARTMAN, BILL 940 BRANTLEY STREET THE VILLAGES, FL 32162 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition JOHN SCHREYER III 1890 LAKE MIGNA DRIVE THE VILLAGES, FL 32162
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS GORA, ELLEN 940 BRANTLEY STREET THE VILLAGES, FL 32162 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition NANNE WOLFF 105 TOWNLINE ROAD #244 VERNON HILLS, IL 60061
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEMBER OF BOARD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition FRED ROBEY 1711 ST JAMES CIRCLE THE VILLAGES, FL 32162
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEMBER AT LARGE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition MICHAEL WOLFF 105 TOWNLINE ROAD #244 VERNON HILLS, IL 60061
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: 		DATE 4/8/2008 (Call) 847 962 2031	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	