

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07121

FILED  
Jan 25, 2010  
Secretary of State

**Entity Name:** ROTARY CLUB OF CHIEFLAND, FLORIDA, INC.

**Current Principal Place of Business:**

105 E PARK AVE  
CHIEFLAND, FL 32626

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1777  
CHIEFLAND, FL 32644 US

**New Mailing Address:**

PO BOX 931  
CHIEFLAND, FL 32644 US

**FEI Number:** 59-2581303

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BEAUCHAMP, ROBERT  
105 E. PARK AVE  
CHIEFLAND, FL 32626 US

**Name and Address of New Registered Agent:**

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: D  
Name: MOUNT, ROBERT  
Address: 110 EAST PARK AVE  
City-St-Zip: CHIEFLAND, FL 32626

Title: T  
Name: BEAUCHAMP, ROBERT J  
Address: 105 EAST PARK AVE  
City-St-Zip: CHIEFLAND, FL 32626

Title: P  
Name: MARTING, BILL  
Address: 410 N MAIN STREET, SUITE #8  
City-St-Zip: CHIEFLAND, FL 32626

Title: VP/D  
Name: LOTT, BEN  
Address: PO BOX 2560  
City-St-Zip: CHIEFLAND, FL 32626

Title: D  
Name: DOUGLAS, ROBERT  
Address: 14 E PARK AVE  
City-St-Zip: CHIEFLAND, FL 32626

Title: S  
Name: HAMMOND, BILL  
Address: PO BOX 931  
City-St-Zip: CHIEFLAND, FL 32644

I hereby 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 all other like empowered.

SIGNATURE: ROBERT BEAUCHAMP

T

01/25/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date