

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07336

FILED
Apr 20, 2009
Secretary of State

Entity Name: ROTARY CLUB OF LEESBURG, FLORIDA, INC.

Current Principal Place of Business:

907 WEBSTER STREET
LEESBURG, FL 347485026

New Principal Place of Business:

Current Mailing Address:

907 WEBSTER STREET
P.O.BOX 2722
LEESBURG, FL 347485026

New Mailing Address:

FEI Number: 59-2514102 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SAYLOR, BRUCE A.
907 WEBSTER STREET
LEESBURG, FL 32748 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 () Delete
Name: SCHWARZ, TAREN
Address: 10219 JOANIES RUN
City-St-Zip: LEESBURG, FL 34788 US

Title: D () Delete
Name: MOODY, ROBERT H
Address: 05640 TWIN PALMS ROAD
City-St-Zip: FRUITLAND PARK, FL 34731 US

Title: S () Delete
Name: TROMBLEY, DONALD
Address: 1004 LEE LANE
City-St-Zip: LEESBURG, FL 34748 US

Title: T () Delete
Name: WIENER, HOWARD
Address: 2288 LAKE POINT CIRCLE.
City-St-Zip: LEESBURG, FL 34748

Title: P () Delete
Name: BRYAN, CLAY
Address: 2680 S.E. 50TH TERRACE
City-St-Zip: OCALA, FL 34471 US

Title: VP () Delete
Name: STIFFLER, STEPHEN H
Address: 6113 SPINNAKER LOOP
City-St-Zip: LADY LAKE, FL 32159 US

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:

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Title: () Change () Addition
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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: CLAY BRYAN

P

04/20/2009

Electronic Signature of Signing Officer or Director

Date