

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003144

FILED
Apr 30, 2009
Secretary of State

Entity Name: ROTARY D6970 YOUTH EXCHANGE, INC.

Current Principal Place of Business:

1 TIMBERLINE TR
SUITE B
ORMOND BEACH, FL 32174 US

New Principal Place of Business:

Current Mailing Address:

1 TIMBERLINE TR
SUITE B
ORMOND BEACH, FL 32174 US

New Mailing Address:

FEI Number: 26-2299339

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, LOUISE H
1301 PLANTATION ISLAND DR
205A
ST AUGUSTINE, FL 32080 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: P () Delete
Name: DAVIS, JODY R
Address: 1 TIMBERLINE TR, STE B
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: VP () Delete
Name: LEARN, WILLIAM E
Address: 1269 BELVEDERE AVE
City-St-Zip: JACKSONVILLE, FL 32205 US

Title: VP () Delete
Name: OVERLY, ROBERT
Address: 4227 ROBIN HOOD RD
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: T () Delete
Name: ANDERSON, LOUISE H
Address: 1301 PLANTATION ISLAND DR, STE 205A
City-St-Zip: ST AUGUSTINE, FL 32080 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: CAMERON, DAPHNE
Address: 518 GENTIAN ROAD
City-St-Zip: ST AUGUSTINE, FL 32086 US

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: LOUISE H ANDERSON

T

04/30/2009

Electronic Signature of Signing Officer or Director

Date