

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005285

FILED  
Jan 20, 2009  
Secretary of State

**Entity Name:** ROTARY CLUB OF BRANDON SOUTH, INC.

**Current Principal Place of Business:**

703 HOLLY TERRACE  
BRANDON, FL 33511

**New Principal Place of Business:**

**Current Mailing Address:**

703 HOLLY TERRACE  
BRANDON, FL 33511

**New Mailing Address:**

**FEI Number:** 26-3726621

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DAVILA, IRMA  
703 HOLLY TERRACE  
BRANDON, FL 33511 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: DAVILA, IRMA  
Address: 703 HOLLY TERRACE  
City-St-Zip: BRANDON, FL 33511 US

Title: T ( ) Delete  
Name: FIELDS, JACKIE  
Address: 3645 TWILIGHT DRIVE  
City-St-Zip: MULBERRY, FL 33860 US

Title: S ( ) Delete  
Name: COOK, SHERRY  
Address: 1529 HIGH KNOLL DR.  
City-St-Zip: BRANDON, FL 33511 US

Title: VP ( ) Delete  
Name: TRUNDY, JENNIFER  
Address: 2917 STARMOUNT DR  
City-St-Zip: VALRICO, FL 33594 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:

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: IRMA DAVILA

PRES

01/20/2009

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

\_\_\_\_\_  
Date