

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000001526

FILED
Feb 16, 2012
Secretary of State

Entity Name: ROTARY CLUB OF NEW TAMPA - EVENING, INCORPORATED

Current Principal Place of Business:

401 E JACKSON STREET SUITE 1700
ATTN: RICHARD T. JONES, ESQ
TAMPA, FL 33602

New Principal Place of Business:

Current Mailing Address:

401 E JACKSON STREET SUITE 1700
ATTN: RICHARD T. JONES, ESQ
TAMPA, FL 33602

New Mailing Address:

FEI Number: 26-4296598

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, RICHARD T ESQ
401 E JACKSON STREET SUITE 1700
TAMPA, FL 33602 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/D
Name: DEAMBROSE, LIZ
Address: PO BOX 46126
City-St-Zip: TAMPA, FL 33646

Title: VP/D
Name: VAKA, PETER
Address: PO BOX 46126
City-St-Zip: TAMPA, FL 33646

Title: S/D
Name: TILL, PATRICIA
Address: PO BOX 46126
City-St-Zip: TAMPA, FL 33646

Title: T/D
Name: DEAMBROSE, ROBERT L
Address: PO BOX 46126
City-St-Zip: TAMPA, FL 33646

Title: D
Name: GATES, ROBERT
Address: PO BOX 46126
City-St-Zip: TAMPA, FL 33646

Title: D
Name: FERGUSON, SHERIDA
Address: PO BOX 46126
City-St-Zip: TAMPA, FL 33646

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 L DEAMBROSE

T/D

02/16/2012

Electronic Signature of Signing Officer or Director

Date