2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10028

FILED Apr 27, 2007 Secretary of State

Entity Name: ROTARY CLUB OF CASSELBERRY CHARITABLE FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

128 OXFORD ROAD

CASSELBERRY, FL 327302115

Current Mailing Address: New Mailing Address:

128 OXFORD ROAD CASSELBERRY, FL 327302115

FEI Number: 59-2542609 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FREEMAN, JR., DANIEL C 128 OXFORD ROAD CASSELBERRY, FL 327302115 US

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:

Name:

Address:

City-St-Zip:

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Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: DV (X) Change () Addition Name: BEAVERS, NEILL Name: SCHAFFER, MIKE

Address: 284 E LONG CREEK COVE Address: PO BOX 300355

City-St-Zip: LONGWOOD, FL 32750 City-St-Zip: FERN PARK, FL 327300355

Title: D () Delete Title: () Change () Addition

 Name:
 WALKER, ROBERT
 Name:

 Address:
 410 KENTWOOD AVE
 Address:

 City-St-Zip:
 SANFORD, FL 32771
 City-St-Zip:

Title: TD () Delete Title: () Change () Addition

 Name:
 FREEMAN JR, DANIEL C
 Name:

 Address:
 1558 LAWNDALE CIR
 Address:

 City-St-Zip:
 WINTER PARK, FL 32792
 City-St-Zip:

 Name:
 COOK, ALBERT
 Name:
 COOK, ALBERT

 Address:
 854 AMBER OAK DR
 Address:
 854 AMBER OAK DR

 City-St-Zip:
 ORLANDO, FL 32817
 City-St-Zip:
 ORLANDO, FL 32817

 Name:
 TERAMAE, GARY
 Name:
 TERAMAE, GARY

 Address:
 3007 ASH PARK POINT
 Address:
 115 LAKE DESTINY TRAIL

 City-St-Zip:
 WINTER PARK, FL 32792
 City-St-Zip:
 ALTAMONTE SPRINGS, FL 32714

Title: DS () Delete Title: DS (X) Change () Addition

SCHICHTING, PAUL

1716 BOMI CIR

WINTER PARK, FL 32792

Name: JUNG, JACQUELINE M
Address: 819 JERICO DR
City-St-Zip: CASSELBERRY, FL 32707

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: DANIEL C FREEMAN JR DT 04/27/2007