

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10868

FILED  
Jan 21, 2009  
Secretary of State

**Entity Name:** THE ROTARY CLUB OF PONTE VEDRA BEACH CHARITIES, INC.

**Current Principal Place of Business:**

MARSH LANDING COUNTRY CLUB  
PONTE VEDRA BEACH, FL 32082

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 70  
PONTE VEDRA BEACH, FL 32004

**New Mailing Address:**

**FEI Number:** 59-2566435

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ISAAC, FRED  
2468 ATLANTIC BLVD.  
JACKSONVILLE, FL 32207 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: TD ( ) Delete  
Name: DORSA, LORRAINE  
Address: 484 JAX DRIVE  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: P ( ) Delete  
Name: SMITH, KENNETH  
Address: 3283 OLD BARN RD W  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: PE ( ) Delete  
Name: SCULLY, CHRIS  
Address: 238 PABLO RD  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: S ( ) Delete  
Name: MCNEAL, KAREN  
Address: 117 OLD PONTE VEDRA DR  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: PE (X) Change ( ) Addition  
Name: PICKETT, DAN  
Address: PO BOX 70  
City-St-Zip: PONTE VEDRA BEACH, FL 32004

Title: P (X) Change ( ) Addition  
Name: SCULLY, CHRIS  
Address: 238 PABLO RD  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: S (X) Change ( ) Addition  
Name: DENARDO, MJ  
Address: PO BOX 70  
City-St-Zip: PONTE VEDRA BEACH, FL 32004

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: CHRIS SCULLY

P

01/21/2009

Electronic Signature of Signing Officer or Director

Date