

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14500

FILED
Apr 25, 2005
Secretary of State

Entity Name: ROTARY CLUB OF BOCA RATON SUNRISE, INC.

Current Principal Place of Business:

C/O WILLIAM SCHNABEL
901 MCCLEARY ST.
DELRAY BEACH, FL 33483

New Principal Place of Business:

Current Mailing Address:

C/O WILLIAM SCHNABEL
901 MCCLEARY ST.
DELRAY BEACH, FL 33483

New Mailing Address:

FEI Number: 59-2668776

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHNABEL, WILLIAM W.
901 MCCLEARY STREET
DELRAY BEACH, FL 33483 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: PE () Delete
Name: KATZ, GIGLEN
Address: 8555 EAGLE RUN DR.
City-St-Zip: BOCA RATON, FL 33434

Title: VP () Delete
Name: SUDAN, KRIS
Address: 11837 ISLAND LAKES LANE
City-St-Zip: BOCA RATON, FL 33498

Title: D () Delete
Name: BERKWICH, ELAINE
Address: 2883 S.W. 22ND CIRCLE 51-D
City-St-Zip: DELRAY BEACH, FL 33445

Title: P () Delete
Name: HIRSCH, SHIRLEY
Address: 7078 SAN SALVADOR
City-St-Zip: BOCA RATON, FL 33433

Title: D () Delete
Name: MORDIS, BARRY
Address: 2901 N. ROCK ISLAND RD.
City-St-Zip: MARGATE, FL 33063

Title: TD () Delete
Name: SCHNABEL, BILL
Address: 901 MCCLEARY STREET
City-St-Zip: DELRAY BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KATZ, EILEEN
Address: 8555 EAGLE RUN DR.
City-St-Zip: BOCA RATON, FL 33434

Title: PE (X) Change () Addition
Name: SUDAN, KRIS
Address: 11837 ISLAND LAKES LANE
City-St-Zip: BOCA RATON, FL 33498

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

Title: D (X) Change () Addition
Name: HIRSCH, SHIRLEY
Address: 7078 SAN SALVADOR
City-St-Zip: BOCA RATON, FL 33433

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 for the exemption stated in Section 119.07(3)(i), 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: WILLIAM W. SCHNABEL

TD

04/25/2005

Electronic Signature of Signing Officer or Director

Date