

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 08, 2008 8:00 am
Secretary of State

05-08-2008 90012 032 ****61.25

DOCUMENT # N20150

1. Entity Name

**THE ROTARY CLUB OF CLEARWATER EAST
FOUNDATION, INC.**



Principal Place of Business

P. O. BOX 4662
CLEARWATER FL 33758
US

Mailing Address

P. O. BOX 4662
CLEARWATER FL 33758
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

59-2833950

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ZSCHAU, JULIUS J
2701 N. ROCKY POINT DR
SUITE 930
TAMPA FL 33607

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature is required when reappointing)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE: BOD
NAME: BROCK, LAURA K ☐ Delete
STREET ADDRESS: 12276 106TH AVE NORTH
CITY-ST-ZIP: SEMINOLE FL 33778

TITLE: PE ☒ Delete
NAME: DOUMET, MUNIR
STREET ADDRESS: 1955 BELLEAIR RD
CITY-ST-ZIP: CLEARWATER FL 33764

TITLE: BMOD ☐ Delete
NAME: PAYANT, RICHARD
STREET ADDRESS: 950 GILFORD STREET
CITY-ST-ZIP: OLDSMAR FL 34677

TITLE: P ☐ Delete
NAME: COTTON, RICHARD J
STREET ADDRESS: 2064 PINNACLE CIR SOUTH
CITY-ST-ZIP: PALM HARBOR FL 34684

TITLE: S ☐ Delete
NAME: PAILLEY, BARBARA
STREET ADDRESS: 2800 SUN GLOUD WAY
CITY-ST-ZIP: CLEARWATER FL 33761

TITLE: VP ☐ Delete
NAME: BURT, ART
STREET ADDRESS: 1732 HICKORY GATE DR SOUTH
CITY-ST-ZIP: DUNEDIN FL 34698

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: Treasurer ☐ Change ☒ Addition
NAME: Robert J. Frederick
STREET ADDRESS: 6334 35th Ave N.
CITY-ST-ZIP: St. Petersburg, FL 33710

TITLE: Board of Directors ☒ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: Vice President ☒ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: President ☒ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Laura Brock

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/7/08

727-572-1400