FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAR 16 AM 11:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N22511 (2)

1. Corporation Name

ROTARY CLUB OF NEW RIVER, INC.

Principal Place of Business	Mailing Address
%JAMES T. MOORE 100 N.W. 82ND AVENUE. S-106 PLANTATION FL 33324	%JAMES T. MOORE 100 N.W. 82ND AVENUE. S-106 PLANTATION FL 33324

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/16/1987
3a. Date of Last Report: 01/28/1994
4. FEI Number: 65-0009270 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 c/o Bruce G. Shaffner	26 same as #2
Suite, Apt. #, etc. 22 2395 Davie Blvd	Suite, Apt. #, etc. 27
City & State 23 Ft. Lauderdale, Fl	City & State 28
Zip / Country 24 33312 / 25 Broward	Zip / Country 29 / 30

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ — $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
MOORE, JAMES T. 100 N.W. 82ND AVENUE, S-106 PLANTATION FL 33324	81 Name: Bruce G. Shaffner 82 Street Address (P.O. Box Number is Not Acceptable): 2395 Davie, Blvd 83 84 City: Ft. Lauderdale, Fl. FL 85 Zip Code: 33312

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ 2-22-95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	1.1 TITLE	President	☒ Change ☐ Addition
NAME	DELOACH, DOUGLAS	1.2 NAME	Bruce G. Shaffner	
STREET ADDRESS	12733 N.W. 11TH COURT	1.3 STREET ADDRESS	2395 Davie Blvd	
CITY-ST-ZIP	SUNRISE FL	1.4 CITY-ST-ZIP	Ft. Lauderdale, Fl 33312	
TITLE	P	2.1 TITLE	President Elect	☒ Change ☐ Addition
NAME	SHAFFNER, BRUCE G	2.2 NAME	229 SW 31st St David Clancy	
STREET ADDRESS	2395 DAVIE BLVD	2.3 STREET ADDRESS	Ft. Lauderdale, Fl 33312	
CITY-ST-ZIP	FT. LAUDERDALE FL	2.4 CITY-ST-ZIP		
TITLE	V	3.1 TITLE	Vice President	☒ Change ☐ Addition
NAME	CLANCY, DAVID E	3.2 NAME	Jon Van Woerden	
STREET ADDRESS	1466 S.W. 10TH TERRACE	3.3 STREET ADDRESS	2137 SW 30th Terr	
CITY-ST-ZIP	FT LAUDERDALE FL	3.4 CITY-ST-ZIP	Ft. Lauderdale, Fl 33312	
TITLE	D	4.1 TITLE	Secretary/D	☐ Change ☐ Addition
NAME	TUTTLE, SARA H	4.2 NAME	Rod Matre	☒
STREET ADDRESS	1510 S.W. 37TH AVENUE	4.3 STREET ADDRESS	5300 SW 10th St. Plantation Fl.	
CITY-ST-ZIP	FT LAUDERDALE FL	4.4 CITY-ST-ZIP		
TITLE	D	5.1 TITLE	Director	☒ Change ☐ Addition
NAME	ALPERN, BURTON	5.2 NAME	Greg Novak	
STREET ADDRESS	5740 S.W. 9TH ST	5.3 STREET ADDRESS	2881 W. David Boulevard	
CITY-ST-ZIP	PLANTATION FL	5.4 CITY-ST-ZIP	Ft. Lauderdale, Fl 33312	
TITLE	D	6.1 TITLE	Director	☒ Change ☐ Addition
NAME	MATRE, RODNEY	6.2 NAME	Frank Da Silva	
STREET ADDRESS	5300 S.W. 10TH ST	6.3 STREET ADDRESS	3950 NW 73rd Ave.	
CITY-ST-ZIP	PLANTATION FL	6.4 CITY-ST-ZIP	Lauderhill Fl. 33319	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ 2-22-95 305-587-2530
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0047131