## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27108

FILED Mar 18, 2009 Secretary of State

Entity Name: COCOA BEACH ROTARY CLUB, INC.

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

C/O C.V. KESSEL JR. 3000 NORTH ATLANTIC AVENUE COCOA BEACH, FL 329315045

Current Mailing Address: New Mailing Address:

TREASURER PO BOX 321344 COCOA BEACH, FL 32932

FEI Number: 59-6159031 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:

KESSEL, C.V. JR. 3000 NORTH ATLANTIC AVENUE COCOA BEACH, FL 329321225 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D () Delete Title: P/D (X) Change () Addition Name: HENDERSIN, LARRY E Name: PRITCHETT, LARRY W Address: 5115 WILDWOOD AVE

Address: 1680 BAYSHORE DR Address: 5115 WILDWOOD AVE
City-St-Zip: COCOA BEACH, FL 32931 City-St-Zip: MERRITT ISLAND, FL 3253

Title: VPPD () Delete Title: VPPD (X) Change () Addition Name: PRITCHETT, LARRY Name: SCHNEIDER, SUSAN G DR Address: 5115 WILDWOOD AVE Address: 660 PLANTATION RD

City-St-Zip: MERRITT ISLAND, FL 32953 City-St-Zip: MERRITT ISLAND, FL 32952

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

 Name:
 ALEXANDER, JOHN
 Name:

 Address:
 1527 S ATLANTIC AVE #401
 Address:

 City-St-Zip:
 MERRITT ISLAND, FL 32953
 City-St-Zip:

Title: T/D ( ) Delete Title: T/D (X) Change ( ) Addition

Name:TRAPNELL, ROBERT LName:TRAPNELL, ROBERT LAddress:425 PIERRE AVENUE #410Address:425 PIERCE AVENUE #410City-St-Zip:CAPE CANAVERAL, FL 32920City-St-Zip:CAPE CANAVERAL, FL 32920

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: ROBERT L TRAPNELL T/D 03/18/2009