

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION  
ANNUAL REPORT  
1995



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

DOCUMENT # **N29830** (9)  
1. Corporation Name  
**ROTARY CLUB OF SARASOTA SUNSET INC.**

Principal Place of Business Mailing Address  
C/O DAVID N. HAND 1800 SECOND STREET #775 SARASOTA FL 34236  
C/O DAVID N. HAND 1800 SECOND STREET #775 SARASOTA FL 34236

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **12/21/1988** 3a. Date of Last Report **04/22/1994**  
4. FEI Number **65-0120936** Applied For  Not Applicable   
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. 189.032, Florida Statutes  Yes  No

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip 25 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent  
**HAND, DAVID N.  
1800 SECOND STREET  
SUITE 775  
SARASOTA FL 34236**

10. Name and Address of Now Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City **FL** 85 Zip Code

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WETHERINGTON BILLY	1.2 NAME	Lynn A. Quartermaine
STREET ADDRESS	3303 A CHESHIRE LANE	1.3 STREET ADDRESS	5749 Britannia Drive
CITY - ST - ZIP	SARASOTA FL	1.4 CITY - ST - ZIP	Sarasota, Florida 34231 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	D	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FLEISCHMANN ROBERT	2.2 NAME	
STREET ADDRESS	3846 KINGSTON BLVD	2.3 STREET ADDRESS	
CITY - ST - ZIP	SARASOTA FL	2.4 CITY - ST - ZIP	
TITLE	P	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRUNATTI LARY	3.2 NAME	
STREET ADDRESS	7085 WILD HORSE CIRCLE	3.3 STREET ADDRESS	
CITY - ST - ZIP	SARASOTA FL	3.4 CITY - ST - ZIP	
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAND DAVID	4.2 NAME	
STREET ADDRESS	2243 CORK OAK	4.3 STREET ADDRESS	
CITY - ST - ZIP	SARASOTA FL	4.4 CITY - ST - ZIP	
TITLE	T	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EDDY MICHAEL	5.2 NAME	
STREET ADDRESS	5837 COLONIAL OAKS BLVD	5.3 STREET ADDRESS	
CITY - ST - ZIP	SARASOTA FL	5.4 CITY - ST - ZIP	
TITLE	P	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CANESSE FREDDY	6.2 NAME	
STREET ADDRESS	2483 BURR OAK COURT	6.3 STREET ADDRESS	
CITY - ST - ZIP	SARASOTA FL	6.4 CITY - ST - ZIP	

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 110.07(3)(k), 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 817, Florida Statutes; and that my name appears in Block 12 or Block 13 of this report, or on an attached page with an address.

SIGNATURE: David N. Hand (Signature and typed name of signing officer or director)  
Date: 4-20-95 District: 813-97-0607