

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30835

FILED
Jan 13, 2008
Secretary of State

Entity Name: ROTARY CLUB OF OCALA, FLORIDA, INC.

Current Principal Place of Business:

2605 SW 33RD ST
#200
OCALA, FL 34474

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 104
OCALA, FL 34478

New Mailing Address:

FEI Number: 59-0618445

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KATHRYN KELLY
3821 NE 19TH ST. CIRCLE
OCALA, FL 34470 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: D () Delete
Name: CHENEY, JERRY
Address: 4921 SE 39TH CT
City-St-Zip: OCALA, FL 34480

Title: D () Delete
Name: HARPER, MIKE
Address: 1929 SE 37TH CTR CIRCLE
City-St-Zip: OCALA, FL 34471

Title: D () Delete
Name: BACHAND, BENNY
Address: 4956 NW 32ND ST
City-St-Zip: OCALA, FL 34482

Title: P () Delete
Name: ROMANAC, THOMAS
Address: 1110 SE 82ND ST RD
City-St-Zip: OCALA, FL 34480

Title: T () Delete
Name: FANTE, NORBERT J
Address: 3337 SE 15TH ST.
City-St-Zip: OCALA, FL 34471

Title: T3 () Delete
Name: SALP, TED
Address: 440 S.E. 29TH CT
City-St-Zip: OCALA, FL 34480

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SIMONS, GARY
Address: 4512 SE 6TH PLACE
City-St-Zip: OCALA, FL 34471

Title: VP (X) Change () Addition
Name: WOODSON, BARBARA
Address: 10638 SW 71ST CIRCLE
City-St-Zip: OCALA, FL 34476

Title: D (X) Change () Addition
Name: FOY, LINDA
Address: 1052 NE 31ST TERRACE
City-St-Zip: OCALA, FL 34471

Title: D (X) Change () Addition
Name: ROMANAC, THOMAS
Address: 1110 SE 82ND ST RD
City-St-Zip: OCALA, FL 34480

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

Title: S (X) Change () Addition
Name: SALP, TED
Address: 440 S.E. 29TH CT
City-St-Zip: OCALA, FL 34480

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: NORBERT J FANTE JR

TREA

01/13/2008

Electronic Signature of Signing Officer or Director

Date