2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N33592

FILED Mar 08, 2003 Secretary of State

Entity Name: ROTARY CLUB OF PALM HARBOR CHARITIES, INC.

Current Principal Place of Business: New Principal Place of Business: C/O JAMES P. NELSON P.O. BOX 515 PALM HARBOR, FL 346827515 PALM HARBOR, FL 346827515 **New Mailing Address: Current Mailing Address:** C/O JAMES P. NELSON P.O. BOX 515 P.O. BOX 515 PALM HARBOR, FL 346827515 PALM HARBOR, FL 346827515 FEI Number: 59-2965167 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: DICKINSON, ROBERT C III RUGHANI, ANDY 33920 US 19 N, SUITE 269 36255 US 19 PALM HARBOR, FL 34684 US PALM HARBOR, FL 34684 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: ANDY RUGHANI 03/08/2003 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete NELSON, JAMES P SCHMIDT, PAUL Name: Name: 32845 US HWY 19 N Address: 33920 US 19 Address: City-St-Zip: PALM HARBOR, FL 34684 City-St-Zip: PALM HARBOR, FL 34684 Title: () Delete Title: () Change () Addition MARTIN, SUSAN L Name: Name: Address: 3970 TAMPA ROAD, SUITE G Address: City-St-Zip: OLDSMAR, FL 34677 City-St-Zip: Title: DS (X) Delete Title: () Change () Addition FRIERBACHER, JAMES J Name: Name: 3343 HIBISCUS DRIVE Address: Address: City-St-Zip: PALM HARBOR, FL 34684 City-St-Zip: Title: () Delete Title: () Change () Addition Name: RUGHANI, ANDY Name: Address: 36255 US 19 N Address: City-St-Zip: PALM HARBOR, FL 34684 City-St-Zip: Title: DΡ (X) Delete Title: () Change () Addition OBERGFALL, ANDREW Name: Name: 713 LYNDHURST ST Address: Address: DUNEDIN, FL 34698 City-St-Zip: City-St-Zip: Title: (X) Delete Title: () Change () Addition BRIGGS, DENNIS Name: Name: Address: 26750 US 19 N Address: CLEARWATER, FL 34621 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ANDY RUGHANI D 03/08/2003