2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34172

FILED Apr 05, 2004 Secretary of State

Entity Name: DUNEDIN NORTH ROTARY ENDOWMENT FOUNDATION, INC.

Current Pr	incipal Place	of Business:	New Princ	New Principal Place of Business:								
2560 GULF	I KYNES, JR TO BAY BLVI TER, FL 3376	D., SUITE 300 5										
Current Ma	ailing Addres	s:	New Maili	New Mailing Address:								
2560 GULF	I KYNES, JR TO BAY BLVI TER, FL 3462											
FEI Number:	59-2995113	FEI Number Applied For ()	El Number Not Appl	icable ()	Certificate of Status Desired ()							
Name and	Address of C	urrent Registered Agent:	Name and	Address o	of New Registered Agent:							
SUITE 300 CLEARWA	TO BAY BLVI TER, FL 3462 named entity s	5 US	oose of changing it	ts registere	d office or registered agent, or both,							
SIGNATUR	F·											
0.0.0.		ic Signature of Registered Agent			Date							
OFFICERS	AND DIRECT	rors:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:								
Title: Name: Address: City-St-Zip:	D () KYNES, ALLEN 265 EDGEWATE DUNEDIN, FL 3	ER DR	Title: Name: Address: City-St-Zip:		() Change () Addition							
Title: Name: Address: City-St-Zip:	PD () RIDENOUR, DA' 2919 WYCOMB PALM HARBOR	E WAY	Title: Name: Address: City-St-Zip:		() Change () Addition							
Title: Name: Address: City-St-Zip:	SD () NIEDER, DALE 455 ALT 19 SOU PALM HARBOR		Title: Name: Address: City-St-Zip:		(X) Change()Addition ACK NDER DRIVE 3OR, FL 34685							
Title: Name: Address: City-St-Zip:	LIVINGSTON, BI	AK PLACE EAST	Title: Name: Address: City-St-Zip:		() Change () Addition							
Title: Name: Address: City-St-Zip:	D () REGISTER, WO PO BOX 1075 DUNEDIN, FL 3		Title: Name: Address: City-St-Zip:		() Change () Addition							
Title: Name: Address: City-St-Zip:	D () KURBER, KEITH 1558 ROXBURG DUNEDIN, FL 3	LANE	Title: Name: Address: City-St-Zip:		() Change () Addition							

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:	DAVID	E.	RIDE	NOU	R				PD)		04/05/2	.004	
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EUGENE HUTTO/ D 1191 ROBMAR RD DUNEDIN, FL, 34698

NANCY M. RIDENOUR/ TD 2919 WYCOMBE WAY PALM HARBOR, FL, 34685