

FILE NOW: FILING FEE IS \$61.25

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Jan 30 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N35945 (7)
1. Corporation Name
PERRINE-CUTLER RIDGE ROTARY CLUB FOUNDATION, INC



Principal Place of Business
17415 S. DIXIE HIGHWAY
MIAMI FL 33157-5434
US

Mailing Address
17415 S. DIXIE HIGHWAY
MIAMI FL 33157-5434
US

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

3. Date Incorporated or Qualified
12/28/1989

3a. Date of Last Report
01/25/1996

4. FEI Number
23-7101136

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

LUDOVICI, EDWARD P., ESQ.
17415 S. DIXIE HWY.
MIAMI FL 33157

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

(Signature, typed or printed name of registered agent and, if applicable,

(NOT: Registered Agent signature required when re-stating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	DELETE
NAME	TEMPLE, GENE	
STREET ADDRESS	18465 SW 92 COURT	
CITY-ST-ZIP	MIAMI FL	
TITLE	PD	DELETE
NAME	GILLMAN, JEFF	
STREET ADDRESS	7800 RED ROAD SUTIE #115	
CITY-ST-ZIP	CORAL GABLES FL	
TITLE	SD	DELETE
NAME	COLLINS, MARIA	
STREET ADDRESS	7417 SW 140 COURT	
CITY-ST-ZIP	MIAMI FL	
TITLE	TD	DELETE
NAME	LUDOVICI, EDWARD P	
STREET ADDRESS	17415 S. DIXIE HIGHWAY	
CITY-ST-ZIP	MIAMI FL	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	Change	Addition	
12 NAME			
13 STREET ADDRESS			
14 CITY-ST-ZIP			
21 TITLE	Change	Addition	
22 NAME	VP/D		
23 STREET ADDRESS	MARIA COLLINS		
24 CITY-ST-ZIP	7417 SW 140 COURT		
31 TITLE	MIAMI, FLORIDA 33183	Change	Addition
32 NAME	S/D		
33 STREET ADDRESS	BRODES HARTLEY		
34 CITY-ST-ZIP	7800 SW 170 STREET		
41 TITLE	MIAMI, FLORIDA 33157	Change	Addition
42 NAME	T/D		
43 STREET ADDRESS	ROB HINTZ		
44 CITY-ST-ZIP	18765 SOUTH DIXIE HIGHWAY		
51 TITLE	MIAMI, FLORIDA 33157	Change	Addition
52 NAME			
53 STREET ADDRESS			
54 CITY-ST-ZIP			
61 TITLE		Change	Addition
62 NAME			
63 STREET ADDRESS			
64 CITY-ST-ZIP			

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

[Signature]

1/21/97 205-235-2111

CR2E037 (9/96)