

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39508

FILED
Apr 13, 2009
Secretary of State

Entity Name: ROTARY CLUB OF WINTER PARK CHARITABLE FOUNDATION, INC.

Current Principal Place of Business:

1050 MORSE BLVD.
WINTER PARK, FL 32789 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1416
STE 301
WINTER PARK, FL 32790 US

New Mailing Address:

PO BOX 1416
WINTER PARK, FL 32790 US

FEI Number: 59-0923231

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCEARCE, KENNETH L
243 WEST PARK AVE
STE 200
WINTER PARK, FL 32789 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: PE/D () Delete
Name: CULPEPPER, DIANE
Address: 440 SEYMOUR AVENUE
City-St-Zip: WINTER PARK, FL 32789

Title: P/D () Delete
Name: WARNER, PITT
Address: 871 VIRGINIA DRIVE
City-St-Zip: WINTER PARK, FL 32789

Title: VP/D () Delete
Name: MAYNARD, LEE
Address: 1531 BERKSHIRE DRIVE
City-St-Zip: WINTER PARK, FL 32789

Title: S/D () Delete
Name: HUGHES, JAY
Address: 1315 SUNSET DRIVE
City-St-Zip: WINTER PARK, FL 32789

Title: T/D () Delete
Name: MARGRAF, WAYNE
Address: 1748 IMPERIAL PALM DRIVE
City-St-Zip: APOPKA, FL 32712

Title: D () Delete
Name: SALERNO, FRANK
Address: 657 BERWICK DRIVE
City-St-Zip: WINTER PARK, FL 32789

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: CULPEPPER, DIANE
Address: 440 SEYMOUR AVENUE
City-St-Zip: WINTER PARK, FL 32789

Title: VP/D (X) Change () Addition
Name: WARNER, PITT
Address: 871 VIRGINIA DRIVE
City-St-Zip: WINTER PARK, FL 32789

Title: PE/D (X) Change () Addition
Name: JONES, FREDERICK
Address: 1616 GOLFSIDE DRIVE
City-St-Zip: WINTER PARK, FL 32792

Title: S/D (X) Change () Addition
Name: SHARPSTEIN, ROBERT
Address: 310 LAKE SEMINARY CIRCLE
City-St-Zip: MAITLAND, FL 32751

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

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

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: DIANE CULPEPPER

P/D

04/13/2009

Electronic Signature of Signing Officer or Director

Date