

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42640

FILED  
Apr 29, 2007  
Secretary of State

**Entity Name:** ROTARY CLUB OF SUNTREE FOUNDATION, INC.

**Current Principal Place of Business:**

7400 N. WICKHAM RD.  
MELBOURNE, FL 32940 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 410278  
MELBOURNE, FL 329410278 US

**New Mailing Address:**

**FEI Number:** 59-3103867

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

IANNAZZI, LOU  
575 TEMPLE ST.  
SATELLITE BEACH, FL 32937 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: PD ( ) Delete  
Name: JAGROWSKI, JERRY  
Address: P.O. BOX 410278  
City-St-Zip: MELBOURNE, FL 32940

Title: SD ( ) Delete  
Name: IANNAZZI, LOUIS  
Address: 575 TEMPLE ST.  
City-St-Zip: SATELLITE BEACH, FL 32137

Title: TD ( ) Delete  
Name: MCGIRR, MICHAEL  
Address: 501 KIMBERLY DR.  
City-St-Zip: MELBOURNE, FL 32940

Title: PS ( ) Delete  
Name: CASTELLO, PETER  
Address: 1519 CYPRESS TRACE DR  
City-St-Zip: MELBOURNE, FL 32940

Title: VPD ( ) Delete  
Name: RAYMOND, PFLEUGER  
Address: P.O. BOX 410278  
City-St-Zip: MELBOURNE, FL 32940

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: RAY, PFLEUGER  
Address: P.O. BOX 410278  
City-St-Zip: MELBOURNE, FL 32940

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

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

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

Title: PVD (X) Change ( ) Addition  
Name: MCGIRR, MICHAEL  
Address: P.O. BOX 410278  
City-St-Zip: MELBOURNE, FL 32940

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: MICHAEL MCGIRR

PVD

04/29/2007

Electronic Signature of Signing Officer or Director

Date