

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED
95 APR -4 AM 10:22

DOCUMENT # N44034 (9)

1. Corporation Name

SUNRISE ROTARY CLUB, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

3708 N. ROOSEVELT RD.
KEY WEST FL 33040
US

3708 N. ROOSEVELT RD.
KEY WEST FL 33040
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/21/1991

3a. Date of Last Report

06/15/1994

4. FEI Number

65-0290177

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☒

\$68.75 Supplemental
Fee Not Required

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MORGAN, DOUGLAS L.
3708 N. ROOSEVELT RD.
KEY WEST FL 33040

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DT
NAME	SASNEK, PHE
STREET ADDRESS	1010 KENNEDY DR.
CITY - ST - ZIP	KEY WEST FL
TITLE	DP
NAME	SCHWESSINGER, W.
STREET ADDRESS	81-BAY DR. BAYPOINT
CITY - ST - ZIP	KEY WEST FL
TITLE	DS
NAME	MORGAN, DOUGLAS
STREET ADDRESS	3708 N. ROOSEVELT RD.
CITY - ST - ZIP	KEY WEST FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DT	☒ Change ☐ Addition
1.2 NAME	SUSAN BOULOK	
1.3 STREET ADDRESS	1010 KENNEDY DR	
1.4 CITY - ST - ZIP	KEY WEST FL 33040	
2.1 TITLE	DP	☒ Change ☐ Addition
2.2 NAME	TOM SAWYER	
2.3 STREET ADDRESS	1411 FIRST ST	
2.4 CITY - ST - ZIP	KEY WEST FL 33040	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplementary 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 checked, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

ANYTIME BEFORE