

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45263

FILED
Apr 21, 2009
Secretary of State

Entity Name: ROTARY CLUB OF SARASOTA KEYS FOUNDATION, INC.

Current Principal Place of Business:

1990 MAIN ST
SUITE 801
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

1990 MAIN ST
SUITE 801
SARASOTA, FL 34236

New Mailing Address:

FEI Number: 65-0296696

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLARKE, ROBERT P
1990 MAIN ST
SUITE 801
SARASOTA, FL 34236 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: VD () Delete
Name: WHITE, SALLY
Address: 1712 STARLING DRIVE
City-St-Zip: SARASOTA, FL 34231

Title: T () Delete
Name: CLARKE, ROBERT P
Address: 1990 MAIN ST SUITE 801
City-St-Zip: SARASOTA, FL 34236

Title: D () Delete
Name: PILSTON, DAVID
Address: 554 BLUE JAY PL
City-St-Zip: SARASOTA, FL 34236

Title: PD () Delete
Name: HENDON, MARVIN
Address: 10519 CHEVAL PL
City-St-Zip: BRADENTON, FL 34202

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WHITE, SALLY
Address: 1712 STARLING DRIVE
City-St-Zip: SARASOTA, FL 34231

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

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

Title: P (X) Change () Addition
Name: WHEELER, EDWIN
Address: 242 ROBIN DRIVE
City-St-Zip: SARASOTA, FL 34236

Title: S () Change (X) Addition
Name: EMSWILLER, JEWELL
Address: 99 SUNSET DRIVE
City-St-Zip: SARASOTA, FL 34236

Title: D () Change (X) Addition
Name: JONES, HERBERT
Address: 4274 BOCA POINTE DRIVE
City-St-Zip: SARASOTA, FL 34236

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: ROBERT P. CLARKE

T

04/21/2009

Electronic Signature of Signing Officer or Director

Date