

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49761

FILED  
Jan 10, 2009  
Secretary of State

**Entity Name:** THE VERO BEACH ROTARY CHARITIES FOUNDATION, INC.

**Current Principal Place of Business:**

1826 14TH AVE  
SUITE 102  
VERO BEACH, FL 32960

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 643224  
VERO BEACH, FL 32964

**New Mailing Address:**

**FEI Number:** 65-0416241

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BRACKINS, A.J.  
1826 14TH AVE, SUITE 102  
VERO BEACH, FL 32960 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: DT ( ) Delete  
Name: BARTON, KATHRYN  
Address: 675 DATE PALM ROAD  
City-St-Zip: VERO BEACH, FL 32963

Title: D ( ) Delete  
Name: LAUER, STEVEN E  
Address: 3426 OCEAN DR.  
City-St-Zip: VERO BEACH, FL 32968

Title: DV ( ) Delete  
Name: NUGENT, JAMES  
Address: 1785 CORAL WAY N.  
City-St-Zip: VERO BEACH, FL 32963

Title: D ( ) Delete  
Name: ALLEN, CARLOS  
Address: 705 TURTLE COVE LANE  
City-St-Zip: VERO BEACH, FL 32963

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

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

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

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

Title: DS ( ) Change (X) Addition  
Name: CARROLL, JOHN  
Address: 530 CAMELIA LANE  
City-St-Zip: VERO BEACH, FL 32963

Title: DP ( ) Change (X) Addition  
Name: BARKETT, GEORGE DR  
Address: PALOMA DR  
City-St-Zip: VERO BEACH, FL 32960

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: KATHRYN F. BARTON

DT

01/10/2009

Electronic Signature of Signing Officer or Director

Date