

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000037

FILED
Jan 14, 2009
Secretary of State

Entity Name: ROTARY CLUB OF NEW PORT RICHEY FUND, INC.

Current Principal Place of Business:

PO BOX 267
NEW PORT RICHEY, FL 346560267

New Principal Place of Business:

6609 RIDGE ROAD, SUITE 4
PORT RICHEY, FL 34668

Current Mailing Address:

PO BOX 267
NEW PORT RICHEY, FL 346560267

New Mailing Address:

6609 RIDGE ROAD, SUITE 4
PORT RICHEY, FL 34668

FEI Number: 50-3250070

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EPTING, PATRICK
6806 CECELIA DR
NEW PORT RICHEY, FL 34653 US

Name and Address of New Registered Agent:

KEHOE, THOMAS
6609 RIDGE ROAD
PORT RICHEY, FL 34668 US

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: THOMAS L KEHOE

01/14/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CONOVER, KURT
Address: 2215 FOGGY RIDGE PKWY
City-St-Zip: LAND O LAKES, FL 34639

Title: PD () Delete
Name: THORNTON, RONALD
Address: 6645 RIDGE RD
City-St-Zip: PORT RICHEY, FL 34668

Title: D () Delete
Name: EPTING, PATRICK
Address: 6806 CECALIA DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: D () Delete
Name: PARRIS, DAVID
Address: 5441 MANATEE POINT DR
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D () Delete
Name: LEMBO, PAUL
Address: 9880 OSCEOLA DR
City-St-Zip: NEW PORT RICHEY, FL 34654

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: PARKER, JUDY
Address: 5511 DRINKARD DR
City-St-Zip: NEW PORT RICHEY, FL 34652

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: JUDY PARKER

DIR

01/14/2009

Electronic Signature of Signing Officer or Director

Date