

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 06, 2010
Secretary of State

Entity Name: GULF BEACHES ROTARY FOUNDATION, INC.

Current Principal Place of Business:

64 DOLPHIN DR.
TREASURE ISLAND, FL 33706 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 8805
MADEIRA BEACH, FL 33738 US

New Mailing Address:

FEI Number: 59-3181809

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEADY, SUZANNE
725 116TH AVE.
TREASURE ISLAND, FL 33706 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: D
Name: ENGLAND, BILL
Address: 3990 58TH WAY NORTH
City-St-Zip: ST. PETERSBURG, FL 33709

Title: SD
Name: DEADY, SUZANNE
Address: 726 116TH AVE.
City-St-Zip: TREASURE ISLAND, FL 33706

Title: D
Name: BLACK, HARRY
Address: 12601 PINE FOREST WAY E
City-St-Zip: LARGO, FL 33773

Title: P
Name: JOH, MEAGHER
Address: 465 S. BAYSHORE DR.
City-St-Zip: MADEIRA BEACH, FL 33708

Title: TD
Name: COWARD, CAROL L
Address: 64 DOLPHIN DR.
City-St-Zip: TREASURE ISLAND, FL 33706

Title: D
Name: CHARLES, COWARD
Address: 64 DOLPHIN DR.
City-St-Zip: TREASURE ISLAND, FL 33706

I hereby 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 all other like empowered.

SIGNATURE: CAROL L. COWARD

TREA

01/06/2010

Electronic Signature of Signing Officer or Director

Date