2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9300000076

FILED Feb 27, 2009 Secretary of State

Entity Name: THE ROTARY CLUB OF ZEPHYRHILLS DAYBREAK, INC.

Current Principal Place of Business: New Principal Place of Business: 37512 SKYRIDGE CIR DADE CITY, FL 33525 US **Current Mailing Address: New Mailing Address:** PO BOX 1797 ZEPHYRHILLS, FL 33539 US FEI Number: 65-0411104 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ROBIN, CHRISTIAN 37512 SKYRIDGE CIRCLE DADE CITY, FL 33525 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete WOOTTON, MICHAEL SOMMERS, THERESA Name: Name: 30724 WRENCREST DR Address: 5316 8TH STREET Address: City-St-Zip: WESLEY CHAPEL, FL 33543 City-St-Zip: ZEPHYRHILLS, FL 33525 Title: DS () Delete Title: () Change () Addition ROBIN, CHRISTIAN Name: Name: Address: 37512 SKYRIDGE CIRCLE Address: City-St-Zip: DADE CITY, FL 33525 City-St-Zip: Title: DV () Delete Title: (X) Change () Addition FUNES, MANNY WOOTTON, MICHAEL Name: Name: 30724 WRENCREST DR. Address: 33542 Address: City-St-Zip: ZEPHYRHILLS, FL 33541 City-St-Zip: WESLEY CHAPEL, FL 33543 Title: () Delete Title: (X) Change () Addition Name: MCKENNEY, LEA Name: MAYBERRY, TIM 5136 CAMBERLEA AVE Address: 5805 WEDGEDIELD Address: City-St-Zip: ZEPHYRHILLS, FL 33541 City-St-Zip: ZEPHYRHILLS, FL 33541 Title: () Delete Title: () Change () Addition THIES, JOHN P Name: Name: 13213 PALMILLA CIRCLE Address: Address: City-St-Zip: DADE CITY, FL 33525 City-St-Zip: Title: () Delete Title: () Change (X) Addition HEINRICH, SHARON Name: Name: Address: Address: 34835 ARBOR GREEN PLACE ZEPHYRHILLS, FL 33541 City-St-Zip: 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: JOHN P THIES T 02/27/2009