## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N9300000165

FILED Apr 28, 2009 Secretary of State

Entity Name: THE ROUNDTABLE CHARITIES OF GRATER BRANDON, INC.

Current Principal Place of Business: New Principal Place of Business:

619 VONDERBURG DRIVE BRANDON, FL 33511

Current Mailing Address: New Mailing Address:

P.O. BOX 1061 BRANDON, FL 33509

FEI Number: 59-3157202 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:

WEAVER, RICHARD H TREASUR

1130 BELLADONNA DRIVE

BRANDON, FL 33510 US

KEITH, W C

1722 STAYSAIL DR

VALRICO, FL 33594 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: W C KEITH 04/28/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition Name: ELAM, B. LEE PRESIDE Name: ELAM, B. LEE

 Name:
 LEAW, B. LEE PRESIDE
 Name:
 LEAW, B. LEE

 Address:
 101 E LUMSDEN RD
 Address:
 101 E LUMSDEN RD

 City-St-Zip:
 BRANDON, FL 33511
 City-St-Zip:
 BRANDON, FL 33511

Title: VD ( ) Delete Title: VD (X) Change ( ) Addition

 Name:
 NICKERSON, JENINE B VICE PR
 Name:
 NICKERSON, JANINE B

 Address:
 2504 ARBORWOOD DR
 Address:
 2504 ARBORWOOD DR

 City-St-Zip:
 VALRICO, FL 335941110
 City-St-Zip:
 VALRICO, FL 335941110

Title: TD ( ) Delete Title: TD (X) Change ( ) Addition

 Name:
 WEAVER, RICHARD H
 Name:
 PALEK IV, FRANCIS X

 Address:
 1130 BELLADONNA DRIVE
 Address:
 1321 ROWANTREE DR

 City-St-Zip:
 BRANDON, FL 33510
 City-St-Zip:
 DOVER, FL 33527

Title: SD () Delete Title: SD (X) Change () Addition

 Name:
 LOWARY, SUE SECRETA
 Name:
 COLLINS, KATHY

 Address:
 1110 SWEET BREEZE DR
 Address:
 5309 LAUREL POINT DR

 City-St-Zip:
 VALRICO, FL 33594
 City-St-Zip:
 VALRICO, FL 33596

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: JANINE NICKERSON VP 04/28/2009