2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003587

FILED Feb 16, 2007 Secretary of State

Entity Name: ORMOND BEACH WEST ROTARY CLUB, INC.

Current Principal Place of Business: New Principal Place of Business: 521 YONGE STREET ORMOND BEACH, FL 32174 **Current Mailing Address: New Mailing Address:** C/O RICHARD A BURT 149 S RIDGEWOOD AVE SUITE 510 DAYTONA BCH, FL 32114 FEI Number: 59-2861739 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: BURT, RICHARD A 149 SÓ RIDGEWOOD AVE SUITE 510 DAYTONA BEACH, FL 32114 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition WILLIAMS, DANNY Name: Name: 80 WENTWORTH LANE Address: Address: City-St-Zip: PALM COAST, FL 32164 City-St-Zip: PED Title: () Delete Title: () Change () Addition BLASS, JEFF Name: Name: Address: 5 LEISURE WOOD WAY Address: City-St-Zip: ORMOND BEACH, FL 32174 City-St-Zip: Title: VPD () Delete Title: () Change () Addition MARTIN, RICK Name: Name: 10 MOSS POINT DRIVE Address: Address: City-St-Zip: ORMOND BEACH, FL 32174 City-St-Zip: Title: SD () Delete Title: () Change () Addition Name: UANINO, TONY Name: 3649 CHRISTA COURT Address: Address: City-St-Zip: ORMOND BEACH, FL 32174 City-St-Zip: Title: () Delete Title: (X) Change () Addition JOHNSON, ROBERT L JOHNSON, ROBERT L Name: Name: 220 S RIDGEWOOD AVE., STE 200 200 S RIDGEWOOD AVE., STE 100 Address: Address: City-St-Zip: DAYTONA BEACH, FL 32114 City-St-Zip: DAYTONA BEACH, FL 32114 Title: () Delete Title: () Change () Addition THAMES IV. WILLIAM Name: Name: Address: 1104 PARKSIDE DR Address: ORMOND BEACH, FL 32174 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT L. JOHNSON AT 02/16/2007