

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000626

FILED
Apr 27, 2009
Secretary of State

Entity Name: THE ROTARY GIFT OF LIFE OF FLORIDA, INC.

Current Principal Place of Business:

3035 BAYSHORE ROAD
SARASOTA, FL 34234 US

New Principal Place of Business:

Current Mailing Address:

3035 BAYSHORE ROAD
SARASOTA, FL 34234 US

New Mailing Address:

FEI Number: 65-0488800

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANG, KLAUS
3035 BAYSHORE ROAD
SARASOTA, FL 34234 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: CH () Delete
Name: AURICCHIO, LOUIS
Address: 8659 WOODBRIAR DRIVE
City-St-Zip: SARASOTA, FL 34238

Title: CEO () Delete
Name: BUCKLEY, WILLIAM
Address: 5757 GULF OF MEXICO DR. # 310
City-St-Zip: LONGBOAT KEY, FL 34228

Title: P () Delete
Name: AGIUS, STEVE
Address: 19856 MARKWARD CROSSING
City-St-Zip: ESTERO, FL 33928

Title: T () Delete
Name: LANG, KLAUS
Address: 3035 BAY SHORE ROAD
City-St-Zip: SARASOTA, FL 34234

Title: S () Delete
Name: KAY, HALINA
Address: 8755 GREY OAKS AVE
City-St-Zip: SARASOTA, FL 34238

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: LOUIS AURICCHIO

CH

04/27/2009

Electronic Signature of Signing Officer or Director

Date