

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 06 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # **N94000000778 (0)**

1. Corporation Name

**THE OCALA ROTARY CLUB FOUNDATION, INC.**

Principal Place of Business

P.O. BOX 104  
OCALA FL 34478

Mailing Address

P.O. BOX 104  
OCALA FL 34478



3. Date Incorporated or Qualified

**02/16/1994**

4. FEI Number

**59-3230446**

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FANTE, NORBERT JR.  
3337 S.E. 15TH STREET  
OCALA FL 34471

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **TD** ☐ DELETE  
NAME **FANTE, NORBERT JR.**  
STREET ADDRESS **3337 S.E. 15TH STREET**  
CITY-ST-ZIP **OCALA FL 34471**

TITLE **P** ☐ DELETE  
NAME **TALARICO, SANDRA**  
STREET ADDRESS **4333 E SILVER SPRINGS BLVD**  
CITY-ST-ZIP **OCALA FL**

TITLE **D** ☐ DELETE  
NAME **JONES, SHARON**  
STREET ADDRESS **4111 SW 30TH CT**  
CITY-ST-ZIP **OCALA FL 34474**

TITLE **S** ☐ DELETE  
NAME **GUERRA, JUAN**  
STREET ADDRESS **4434 S.E. 13TH STREET**  
CITY-ST-ZIP **OCALA FL 34471**

TITLE **D** ☒ DELETE  
NAME **DEAN, JONATHAN**  
STREET ADDRESS **14025 NW CR 464 B**  
CITY-ST-ZIP **MORRISTOWN FL 32668**

TITLE **VP** ☐ DELETE  
NAME **FULLER, JOHN**  
STREET ADDRESS **1709 SE 38TH AVE**  
CITY-ST-ZIP **OCALA FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition  
2.2 NAME **Director**  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE **Assoc. H. Secretary** ☐ Change ☒ Addition  
5.2 NAME **Oon Hunt**  
5.3 STREET ADDRESS **13862 SE 145th Terrace**  
5.4 CITY-ST-ZIP **OKlawaha, FL 34475**

6.1 TITLE **President** ☒ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

**Sandra B. Mortham**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**1/28/98** **352-237-7277**  
Date Daytime Phone # 0068101

CR2E037 (10/97)