## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N94000001417

FILED Jan 21, 2007 Secretary of State

Entity Name: ROTARY CLUB OF WEST JACKSONVILLE, FLORIDA, INCORPORATED

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

POST OFFICE BOX 382055 5620 MARATHON PKWY JACKSONVILLE, FL 32238 JACKSONVILLE, FL 32244

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 382055 JACKSONVILLE, FL 32238

FEI Number: 59-1298191 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:

GILL, LARRY M SR

10498 HAMLET TERRACE

JACKSONVILLE, FL 32221 US

IMRAY, SCOTT W

12731 HUNT CLUB RD N

JACKSONVILLE, FL 32224 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: SCOTT W IMRAY 01/21/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: DT ( ) Delete Title: DT (X) Change ( ) Addition

 Name:
 IMRAY, SCOTT W DMD
 Name:
 GILL, LARRY W

 Address:
 12731 HUNT CLUB RD N
 Address:
 10498 HAMLET TER

 City-St-Zip:
 JACKSONVILLE, FL 32224
 City-St-Zip:
 JACKSONVILLE, FL 32221

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

 Name:
 REGISTER, JAMES F
 Name:

 Address:
 11905 LITTLE CREEK LANE
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32223
 City-St-Zip:

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

 Name:
 PRENDERGAST, MICHAEL G
 Name:

 Address:
 1916 WOODMERE DRIVE
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32210
 City-St-Zip:

 $\label{eq:time_potential} \mbox{Title:} \qquad \mbox{DV} \qquad \mbox{(X) Delete} \qquad \mbox{Title:} \qquad \mbox{() Change () Addition}$ 

 Name:
 OVERTON, JAMES N
 Name:

 Address:
 3751 OAK POINT AVE
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32210
 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: LARRY W GILL DT 01/21/2007