

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001417

FILED  
Jan 24, 2009  
Secretary of State

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

**Current Principal Place of Business:**

619 CASSAT AVE.  
JACKSONVILLE, FL 32205

**New Principal Place of Business:**

6802 COMMONWEALTH AVE  
JACKSONVILLE, FL 32254

**Current Mailing Address:**

POST OFFICE BOX 425  
MIDDLEBURG, FL 32050

**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:**

JOHN, RUNION  
4693 IVANHOE RD.  
JACKSONVILLE, FL 32210 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: PRES ( ) Delete  
Name: PLATT, TOMMY T  
Address: 4376 ROMA BLVD.  
City-St-Zip: JACKSONVILLE, FL 32210

Title: VP ( ) Delete  
Name: CRUMPLER, MICHAEL  
Address: 4126 GARIBALDI AVE.  
City-St-Zip: JACKSONVILLE, FL 32210

Title: SEC. ( ) Delete  
Name: SCHEU, FRANK M  
Address: 5307 SHORECREST DR  
City-St-Zip: JACKSONVILLE, FL 32210

Title: TRES (X) Delete  
Name: RUNION, JOHN  
Address: 4693 IVANHOE RD.  
City-St-Zip: JACKSONVILLE, FL 32210

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: CRUMPLER, MIKE  
Address: PO BOX 382055  
City-St-Zip: JACKSONVILLE, FL 32238

Title: VP (X) Change ( ) Addition  
Name: RUNION, JOHN  
Address: PO BOX 382055  
City-St-Zip: JACKSONVILLE, FL 32238

Title: TREA (X) Change ( ) Addition  
Name: SCHEU, FRANK M  
Address: PO BOX 382055  
City-St-Zip: JACKSONVILLE, FL 32238

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: JOHN RUNION

VP

01/24/2009

Electronic Signature of Signing Officer or Director

Date