

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997  
AMOUNT DUE ON OR BEFORE 9/17/97: \$81.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Jul 28 1997 8:00am  
Secretary of State

DOCUMENT # N94000003425 (5)  
1. Corporation Name

THE ROTARY CLUB OF SARASOTA, A.M., INC.

Principal Place of Business

Mailing Address

3737 BAHIA VISTA, STE. 11  
SARASOTA FL 34232  
US

3737 BAHIA VISTA  
STE. 11  
SARASOTA FL 34232  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/07/1994  
3a. Date of Last Report 08/07/1996

4. FEI Number 36-3980994  
Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

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

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MILLER, GAIL  
3737 BAHIA VISTA  
STE. 11  
SARASOTA FL 34232

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 ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☒ Change ☐ Addition

T  
NAME RANCOURT, MICHAEL  
STREET ADDRESS 7261 BEE RIDGE ROAD  
CITY-ST-ZIP SARASOTA FL

1.1 TITLE TS  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

D  
NAME RANCOURT, DAVE  
STREET ADDRESS 7261 BEE RIDGE ROAD  
CITY-ST-ZIP SARASOTA FL

2.1 TITLE PD  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

D  
NAME HURLBURT, FRANK III  
STREET ADDRESS 3530 S. OSPREY AVENUE  
CITY-ST-ZIP SARASOTA FL 34239

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

D  
NAME FALLON, RICHARD  
STREET ADDRESS 3816 COUNTRY SIDE LANE  
CITY-ST-ZIP SARASOTA FL 34233

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

D  
NAME SNYDER, DONALD H JR  
STREET ADDRESS 5803 26TH STREET WEST  
CITY-ST-ZIP BRADENTON FL 34207

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

S  
NAME MILLER, GAIL  
STREET ADDRESS 3737 BAHIA VISTA, SUITE 11  
CITY-ST-ZIP SARASOTA FL

6.1 TITLE President - Elect  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Michael Rancourt, Secretary  
7-23-97 941-925-7824

CR2E037 (4/97)