FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9700003279

1. Corporation Name MELBOURNE ROTARY FOUNDATION, INC.					
MELDOURNE ROTARY FOUN	DATION, INC.				
Principal Place of Business	Mailing Address				
PO BOX 997 MELBOURNE FL 32902-997 US	PO BOX 997 MELBOURNE FL 32902-997 US				
Principal Place of Business 21	2a. Mailing Address 26				
Suite, Apt. #, etc.	Suite, Apt. #, etc.				
City & State	City & State				

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FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90287 024 ****61.25

3. Date incorporated or Qualifed

5. Certifcate of Status Desired

06/05/1997

4. FEI Number
NOT APPLICABLE

Zip	Country	Zip	Country	6. Election Campaign Financing	\$5.00	May Be		
4	25	29 30	0	Trust Fund Contribution	Added to	Fees		
<u> </u>	9. Name and Address of Current R	egistered Agent	10. Name and Address of New Registered Agent					
81 NameRobert W Carnichael, Ir								
	V. DAVID —		82 Street	Address (P.O. Box Number is Not Asceptable)	· ·			
	IBISCUS BLVD		83	180 Spring Call D				
-SUITE 209								
	NE FL 32901		84 City	nelbourne FI		901		
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Worlda Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, at 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 17.0505, Florida Statutes.								
			2 520,0100.		_	i		
SIGNATURE	Signature, types or printed name of registered eigent an	d title if applicable. (NOTE: Re	egistered Agent signature re					
12.	OFFICERS AND I	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A				
TITLE *	P	☐ DELETE	1.1 TITLE	P	Change	Addition		
NAME -	MCGEE, DON		1.2 NAME	DUMMERIBAUL				
STREET ADDRESS	224 MELBOURNE AVE		1.3 STREET ADDRESS	401 RIVERVIEW LY				
CITY-ST-ZIP	INDIALANTIC FL 32903		1.4 CITY-ST-ZIP	MELBOURNE BEACH, FL	32951			
TITLE -	V	☐ DELETE	2.1 TITLE	V	Change	Addition		
NAME -	DUMMER, PAUL-		2.2 NAME	JEFFERS, JOHN 353 DAYTON Blud				
STREET ADDRESS	401 RIVERVIEW LANE		2.3 STREET ADDRESS	353 DAYTON Blub	_			
CITY-ST-ZIP	MELBOURNE BCH FL 32951		2.4 CITY-ST-ZIP	MELBOURNE VILLAGE FL		`		
TITLE	S	☐ DELETE	3.1 T/TLE		Change	Addition \		
NAME	CARMICHAEL, BOB	,	3.2 NAME					
STREET ADDRESS	2470 VERMONT ST		3.3 STREET ADDRESS					
CITY-ST-ZIP	W MELBOURNE FL 32904		3.4. CITY-ST-ZIP		**			
TITLE	1 —	☐ DELETE	4.1 TITLE	T	Change	Addition		
NAME	JEFFERS, JOHN		4.2 NAME	KENNEDY, MICHELLE		'		
STREET ADDRESS	353 DAYTON BLVD		4.3 STREET ADDRESS	3055 BARK VILLAGE WAY				
CITY-ST-ZIP	MELBOURNE VILLAGE FL 32904		4.4 CITY-ST-ZIP	MELBOURNE, FL 32935	• 			
TITLE	D-	☐ DEFELE	5.1 TITLE	D	Change	Addition		
NAME	COX, DALE-		5.2 NAME	MCGEE, DOH				
STREET ADDRESS	969 HAAS AVE-		5.3 STREET ADDRESS	224 MELBOURNE AVE				
CITY-ST-ZIP -	PALM BAY FL 32907		5.4 CITY-ST-ZIP	INDIALANTIC, FL 32903				
TITLE .	D	☐ DELETE	6.1 TITLE	'	Change	Addition		
NAME *	ARTER, KEVIN		6.2 NAME	OLIVER, JOE 185PANISH COVEDR				
STREET ADDRESS	450 SEABREEZE DR		6.3 STREET ADDRESS					
om/ by Jin	INDIALANTIC FL 32903		6.4 CITY-ST-ZIP	MELBOURNE, FL 32940				
14. I hereby	certify that the information supplied with	this filing does not qualify for the	ne exemption stated	in Section 119.07(3)(i), Florida Statutes. I further co	ertify that the in	nformation		

14. I 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 only an attachment with an address, with all other like empowered.

SIGNATURE:

SIGUATION DEPLOYED ON PRINTED HAME ON SIGNING DEFICER OR DIRECTOR

5/13/99 (40)676 -3024

R2E037 (11/98)

Applied For
Not Applicable
\$8.75 Additional

Fee Required