

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003279

FILED
Jul 08, 2009
Secretary of State

Entity Name: MELBOURNE ROTARY CLUB FOUNDATION, INC.

Current Principal Place of Business:

1290 W. EAU GALLIE BLVD
MELBOURNE, FL 32935 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 997
MELBOURNE, FL 329020997 US

New Mailing Address:

FEI Number: 27-0214256 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SLONIM, DAVID
1290 W. EAU GALLIE BLVD
MELBOURNE, FL 32935 US

Name and Address of New Registered Agent:

THE SLONIM LAW FIRM, PA
1290 W. EAU GALLIE BLVD
MELBOURNE, FL 32935 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: DAVID SLONIM

07/08/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SLONIM, DAVID
Address: PO BOX 997
City-St-Zip: MELBOURNE, FL 32902

Title: S () Delete
Name: MORTON, JUSTIN
Address: PO BOX 997
City-St-Zip: W MELBOURNE, FL 32902

Title: D () Delete
Name: FACCIOBENE, ADAM
Address: PO BOX 997
City-St-Zip: MELBOURNE, FL 32902

Title: T () Delete
Name: MARSHALL, GRADY
Address: PO BOX 997
City-St-Zip: MELBOURNE, FL 32902

Title: D (X) Delete
Name: JEFFERS, JOHN
Address: PO BOX 997
City-St-Zip: MELBOURNE, FL 32902

Title: VP (X) Delete
Name: PERDUE, JAY
Address: PO BOX 997
City-St-Zip: MELBOURNE, FL 32902

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DAVID SLONIM

P

07/08/2009

Electronic Signature of Signing Officer or Director

Date