

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005147

FILED
Feb 17, 2009
Secretary of State

Entity Name: THE LAKE PLACID NOON ROTARY CLUB FOUNDATION, INC.

Current Principal Place of Business:

165 E. INTERLAKE BLVD
LAKE PLACID, FL 33852

New Principal Place of Business:

Current Mailing Address:

165 E. INTERLAKE BLVD
LAKE PLACID, FL 33852

New Mailing Address:

P.O. BOX 852
LAKE PLACID, FL 33862

FEI Number: 65-0800421

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRATTON, W. BRUCE
165 E. INTERLAKE BLVD.
LAKE PLACID, FL 33852 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: PD () Delete
Name: ELLIOTT, MATT
Address: P.O. BOX 3131
City-St-Zip: LAKE PLACID, FL 33862

Title: P () Delete
Name: CALLAHAN, MARGARET
Address: 1600 CEDARBROOK ST
City-St-Zip: LAKE PLACID, FL 33852

Title: S () Delete
Name: CARRES COSTELLO, SARAH
Address: 3150 BLUEBIRD AVE
City-St-Zip: LAKE PLACID, FL 33852

Title: TD () Delete
Name: STRATTON, BRUCE
Address: 165 E. INTERLAKE BLVD.
City-St-Zip: LAKE PLACID, FL 33852

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: T (X) Change () Addition
Name: STRATTON, W. BRUCE
Address: 165 E. INTERLAKE BLVD.
City-St-Zip: LAKE PLACID, FL 33852

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: W. BRUCE STRATTON

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02/17/2009

Electronic Signature of Signing Officer or Director

Date