

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008731

Entity Name: DEERWOOD ROTARY CHARITIES, INC.

Current Principal Place of Business:

C/O EDWARD C. AKEL
I INDEPENDENT DRIVE #2301
JACKSONVILLE, FL 32202

Current Mailing Address:

C/O EDWARD C. AKEL
I INDEPENDENT DRIVE #2301
JACKSONVILLE, FL 32202

FEI Number: 59-3761129

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AKEL, EDWARD C
1 INDEPENDENT DRIVE
SUITE 2301
JACKSONVILLE, FL 32202 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name WHITE, EDWARD
Address 13851 LONGS LANDING RD E
City-State-Zip: JACKSONVILLE FL 32225

Title PRESIDENT, DIRECTOR
Name ALLEN, EDDIE
Address 10080 GOLF CLUB DRIVE
City-State-Zip: JACKSONVILLE FL 32256

Title TREASURER, DIRECTOR
Name ROBINSON, RON
Address 10085 CHESTER LAKE RD. E
City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR
Name AKEL, EDWARD C
Address ONE INDEPENDENT DR SUITE 2301
City-State-Zip: JACKSONVILLE FL 32202

Title SECRETARY, DIRECTOR
Name OLINTO, DAMON
Address 9118 BARNSTAPLE LN
City-State-Zip: JACKSONVILLE FL 32256

Title PRESIDENT-ELECT, DIRECTOR
Name SHEFFIELD, DAVID
Address 4348 KINCARDINE DR
City-State-Zip: JACKSONVILLE FL 32256

I hereby 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 all other like empowered.

SIGNATURE: EDWARD C. AKEL

DIRECTOR

01/09/2013

Electronic Signature of Signing Officer/Director Detail

Date