

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000003704

**Entity Name:** ROTARY CLUB OF LEESBURG, FLORIDA, FOUNDATION, INC.

**FILED**  
**Apr 25, 2014**  
**Secretary of State**  
**CC1569829187**

**Current Principal Place of Business:**

907 WEBSTER STREET  
LEESBURG, FL 34748

**Current Mailing Address:**

PO BOX 2722  
LEESBURG, FL 34748

**FEI Number: APPLIED FOR**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

SAYLOR, BRUCE A  
907 WEBSTER STREET  
LEESBURG, FL 34748 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 CDP  
Name RUMBLEY, CLIFTON  
Address 2118 SANDRIDGE CIRCLE  
City-State-Zip: EUSTIS FL 32726

Title D  
Name MITTERMAIER, BARBARA  
Address 33323 COVENTRY DRIVE  
City-State-Zip: LEESBURG FL 34788

Title D  
Name RAGONA, ALFRED  
Address 3616 BAYSHORE CIRCLE  
City-State-Zip: TAVARES FL 32778

Title VP  
Name SKOLNIK, ROBERT  
Address 907 WEBSTER STREET  
City-State-Zip: LEESBURG FL 34748

Title S  
Name TROMBLEY, DONALD  
Address 907 WEBSTER STREET  
City-State-Zip: LEESBURG FL 34748

Title T  
Name GANGONE, LUCY  
Address 907 WEBSTER STREET  
City-State-Zip: LEESBURG FL 34748

*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: CLIFTON RUMBLEY**

**P**

**04/25/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date