2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N17000004341

Entity Name: ROTARY CLUB OF DR. PHILLIPS FOUNDATION, INC.

FILED
Aug 13, 2019
Secretary of State
5758988295CC

Current Principal Place of Business:

3624 SERENA LANE

CLERMONT, FL 34711-5049

Current Mailing Address:

P.O. BOX 1381

WINDERMERE, FL 34786 US

FEI Number: 82-1230183 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RUTHANN DILAURI 7751 KINGSPOINTE PKWY., #117 ORLANDO, FL 32819 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	SECRETARY, DIRECTOR	Title	TREASURER, DIRECTOR
Name	STONE, BETHANY	Name	VECCIA, DENNIS P
Address	8004 SOLITARE CT	Address	3624 SERENA LANE
City-State-Zip:	ORLANDO FL 32836	City-State-Zip:	CLERMONT FL 34711

Title DIRECTOR Title DIRECTOR

Name GOLDSTEIN, JOSEPH Name HANLEY, MICHAEL

Address PO BOX 1381 Address PO BOX 1381

City-State-Zip: WINDERMERE FL 34786 City-State-Zip: WINDERMERE FL 34786

TitleDIRECTORTitleDIRECTORNameKAMRADA, M SALLYNameFICKETT, ALANAddressPO BOX 1381AddressPO BOX 1381

City-State-Zip: WINDERMERE FL 34786 City-State-Zip: WINDERMERE FL 32819

Title DIRECTOR Title DIRECTOR

Name MURRAY, BECKY Name JAMIESON, STEVEN A

Address PO BOX 1381 Address P.O. BOX 1381

City-State-Zip: WINDERMERE FL 32819 City-State-Zip: WINDERMERE FL 34786

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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: JOSEPH GOLDSTEIN

DIRECTOR

08/13/2019

Officer/Director Detail Continued:

Title PRESIDENT, DIRECTOR
Name GALLOWAY, COLIN F

Address P.O. BOX 1381

City-State-Zip: WINDERMERE FL 34786