

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000001701

**Entity Name:** ROTARY CLUB OF EAST ARLINGTON, INC.**Current Principal Place of Business:**8596 ARLINGTON EXPRESSWAY  
JACKSONVILLE, FL 32211**Current Mailing Address:**644 CESERY BOULEVARD 250  
JACKSONVILLE, FL 32211**FEI Number:** 59-3148031**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BRIAN, LEE J  
644 CESERY BOULEVARD 250  
JACKSONVILLE, FL 32211 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	PD
Name	SCHULER, CARL S
Address	1346 WINDSOR HARBOR DRIVE NORTH
City-State-Zip:	JACKSONVILLE FL 32225

Title	SD
Name	BERGMAN, DON
Address	10142 GENI HILL CIRCLE NORTH
City-State-Zip:	JACKSONVILLE FL 32225

Title	D
Name	LEE, BRIAN
Address	12410 TROPIC DRIVE
City-State-Zip:	JACKSONVILLE FL 32225

Title	VPD
Name	SMITH, JIM
Address	3828 FEATHER OAKS DRIVE EAST
City-State-Zip:	JACKSONVILLE FL 32277

Title	TD
Name	PLATO, MAUREEN
Address	6228 THUMPER STREET
City-State-Zip:	JACKSONVILLE FL 32210

*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:** CARL S SCHULER

PD

02/06/2017

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