

Rotary Club of Marion, IL #3323
EXPENSE REIMBURSEMENT FORM

Send completed form and supporting documentation to the President:

Date 3-30-21
Payee Name Secretary of State
Address _____

Amount \$ 10⁰⁰

Requested by _____
Address _____

Phone _____

Mail check to: Payee Requesting party _____

Description of Expense/Advance Fee for Annual Report to the State

Charge to program or budget line item: 7425 Annual Report

No reimbursement or advance will be made without the appropriate documentation.

Approved by Committee Chair _____

Approved by President Tyler James Patton
Date _____

(rev 7-11)

Date 3/30/21

**SECRETARY OF STATE JESSE WHITE
STATE OF ILLINOIS**

General Not For Profit Corporation Act

ANNUAL REPORT
(Form NFPCAB - Rev. 03/10/2009)

NOTICE

The filing fee is \$10, payable to the "Secretary of State". Add penalty of \$3 if the annual report is late. Enter the total due where indicated below on the annual report.

Definitions: "Anniversary" means that day each year exactly one year or more after:

(1) The date stamped on the Articles of Incorporation filed under Section 102.15 of the General Not For Profit Corporation Act, in the case of a domestic corporation.

(2) The date stamped on the Application for Authority filed under Section 113.20 of the General Not For Profit Corporation Act, in the case of a foreign corporation.

"Anniversary Month" means the month in which the anniversary of the corporation occurs.

CHECKLIST:

Items 4, 5, 6 and 7 have been completed.

Item 8 is signed by a duly authorized officer.

A check for the total due is enclosed.

Write File Number on check. Do not staple or paper clip check to the annual report.

RETURN TO:

Jesse White, Secretary of State
Department of Business Services
Springfield, IL 62756
Telephone (217) 782-7808
www.cyberdriveillinois.com

Restart #: 139968

Corporate Name	MARION ROTARY CLUB
----------------	--------------------

File Number	N 5426-466-6
File Prior To:	5-1-2021
FILING FEE	\$10.00
LATE FEE IS \$3.00	
Total Due	\$10⁰⁰

Jesse White Secretary of State
Department of Business Services
501 S 2nd Street Rm 328
Springfield IL 62756-5520

542646660515202101300010000

FILING FEE IS \$10.
IF LATE, ADD PENALTY OF \$3.

General Not For Profit Corporation Act

ANNUAL REPORT
(Form NFPCAF - Rev. 09/30/2009)

***** THIS REPORT CAN BE FILED ON-LINE @ www.cyberdriveillinois.com. *****
(USE BLACK INK)

02-19-19
WILLIAMSON COUNTY

MARION ROTARY CLUB
% SCOTT ALLEN PHELPHS
208 W MAIN ST PO BOX 341
MARION IL 62959

Item 1. Verify that the corporate name is correct.

Item 2. Verify that the name of the registered agent and the address of the registered office are correct. You cannot change the registered agent and/or registered office on the annual report form printed below. In order to change the registered agent and/or registered office, it will be necessary to file with the Secretary of State form NFP 105.10/105.20. Mail the NFP 105.10/105.20, Annual Report and \$5 filing fee TOGETHER in the SAME envelope. This form can be downloaded from our internet web site at www.cyberdriveillinois.com. Click on "Departments", then "Business Services" then "Publications and Forms".

Items 3(a), 3(b). Verify printed information is correct.

Item 4. Must set forth the names and addresses of all officers and directors of the corporation as of the date of signing. **ILLINOIS CORPORATIONS MUST HAVE AT LEAST THREE (3) DIRECTORS!** If there are additional officers and/or more than three directors, you must attach a list to this report setting forth all other name(s), title(s) and address(es). Please write the file number on all attachments.

Item 5. Please complete this item.

Item 6. Please mark the appropriate box where indicated in response to the following questions:

(a) Is this corporation a **CONDOMINIUM** Association as established under the Condominium Property Act?

(b) Is this corporation a **COOPERATIVE HOUSING CORPORATION** defined in Section 216 of the Internal Revenue Code of 1954?

(c) Is this corporation a **HOMEOWNER'S ASSOCIATION** which administers a Common Interest Community as defined in Subsection (c) of Section 9-102 of the Code of Civil Procedure?

Item 7. Please complete this item.

Item 8. **THIS REPORT MUST BE SIGNED BY A DULY AUTHORIZED OFFICER OF THE CORPORATION!** Please type or print the name and title of the officer signing this report as well as the date of signing.

DETACH AT PERFORATION - DO NOT SUBMIT A PHOTOCOPY

Page #: 007776

1) Corporate Name MARION ROTARY CLUB		File Number N 5426-466-6	
4) President Name/Address Tyler Patton, 1503 Brittany Lane, Marion, IL 62959		3a) Date of Inc./Qual. 05-30-1986	
Secretary Name/Address Aaron Smith, 1807 Eagle Drive, Marion, IL 62959		3b) State of Inc. ILLINOIS	
Treasurer Name/Address Wayne Gerlock, 1403 Firefly Ct, Carterville, IL 62918		Annual Report General Not For Profit Corporation Act	
Director Name/Address Elaine Melby, 12601 Egypt Shores Rd, Creal Springs, IL 62922			
Director Name/Address Carl Nielsen, 904 N. Market St, Marion, IL 62959			
Director Name/Address Keith Dates, 1805 Eagle Drive, Marion, IL 62959		Year of: 2021	
5) Brief Description of the corporation's activities: Service to The Community		6a) Is this Corporation a CONDOMINIUM ASSOCIATION? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
7) Principal Address of the Corporation (Street, City, State, Zip Code) PO Box 341, Marion, IL 62959		6b) Is this Corporation a COOPERATIVE HOUSING CORP.? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
2) Registered Agent % SCOTT ALLEN PHELPHS 02-19-19 208 W MAIN ST PO BOX 341 MARION IL 62959 WILLIAMSON COUNTY		6c) Is this Corporation a HOMEOWNER'S ASSOCIATION? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Under the penalty of perjury and as an authorized officer, I declare that this annual report, pursuant to the provisions of the General Not For Profit Corporation Act, has been examined by me and is, to the best of my knowledge and belief, true, correct and complete.		8) Signature Wayne Gerlock, Treasurer 3/30/21 Date	