2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 24, 2000 8:00 am
Secretary of State
08-24-2000 90029 021 ****70.00

DOCUMENT # 704925

1. Entity Name

OPTIMIST CLUB OF IVES ESTATES, NORTH MIAMI BEACH L

Principal Place of Business	Mailing Address
1511 N.E. 207 STREET NORTH MIAMI BEACH FL 33179	1511 N.E. 207 STREET NORTH MIAMI BEACH FL 33179

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-6168880 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PALMER, JOAN S 1321 NE 209 TERR NO MIAMI BEACH FL 33179	Name BERNADETTE WILSON Street Address (P.O. Box Number is Not Acceptable) 1511 NE 207 ST City N. M.B. FL Zip Code 33179

8. 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 Bernadette L Wilson BERNADETTE L. WILSON DATE 8-20-00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25
After September 13, 2000 min. will be $236.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD GOLDMAN, JANICE 1331 NE 209 TERR. NMB FL 33179	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MONTY PEREZ 21021 NE 24 CT NMB FL 33180	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD MCCOURT, JIM 520 SW 1ST AVE HALLANDALE FL 33009	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD JAMES GUSTAFSON 1420 NE 201 TERR NMB FL 33179	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD PALMER, WILLIAM 1321 NE 209 TERR NO MIAMI BEACH FL 33179	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD RICHARD BUYHAN 3601 MONROE ST # 103 Hollywood FL 33021	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD MCCOURT, SUSAN 520 SW 1ST AVE HALLANDALE FL 33009	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BERNADETTE WILSON 1511 NE 207 ST NMB FL 33179	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD PALMER, JOAN S 1321 NE 209 TERR NMB FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (5/00)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Bernadette L. Wilson SIGNATURE REQUIRED BERNADETTE L. WILSON 8-20-00 954-920-6010
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #