FILED May 01, 2006 8:00 am Secretary of State 05-01-2006 90454 033 ****70.00

854-920-6010

2006	NOI-FOR-PROFII CORPORATIO	N
	ANNUAL REPORT	

DOCUMENT # 704925 1. Entity Name OPTIMIST CLUB OF IVES ESTATES, NORTH MIAMI BEACH, INC.										05-01-200	06 90454	033 ****70	0.00
Principal Place of Business Mailing Address 1511 N.E. 207 STREET 1511 N.E. 207 STREET NORTH MIAMI BEACH, FL 33179 NORTH MIAMI BEACH, FL 331						79		1	53 11	60031		. 11071	
2. Principal Place of Business		3. Mailing	3. Mailing Address				.						
Suite, Apt. #, etc.		Suite,	Suite, Apt. #, etc.				011	12006	Chg-NP	CR2E	E037 (11/05)		
City & Stat	e		City &	City & State			4. FEI Number 59-6168880						oplied For ot Applicable
Zip		Country	Zip	Zip Co		intry	5. Certificate of Status Desire				- X	\$8.75 Add	ditional
	6. Name	and Address of Current I	Registered A	\gent				7. Na	me and	Address of Nev	v Registere	d Agent	
WILSON, I	DEDNADE	TTC '				Name							
1511 NE 2 NO MIAMI	:07 ST					Street Ac	ddress (I	P.O. Bo	x Numbe	er is Not Accepta	ible)		······································
	DE (011,	12.00110										13.0	
						City					F		
	named entit tions of regist	y submits this statement for tered agent.	r the purpose	of changing its	registere	ed office or	register	ed agei	nt, or bot	h, in the State of	Florida. La	nm familiar with,	and accept
SIGNATURE	Breno	softhe R. U.	and title if applicat	ole (NOTE	erna. . Registerer	dette	L. L	ا <u>ب</u> when rein	l Sco	л	U	1-25-00	<u>o</u>
Filing Fee is \$61.25 9. Elec													
	_			9. Election Can Trust Fund C				\$5.0	May B	e F		eck payable to partment of Si	
10.	_		RECTORS	Trust Fund C			Á	\$5.00 Added	to Fees	e F	lorida Dep	partment of S	tate
TITLE	PD PD	May 1, 2006 OFFICERS AND DIR	RECTORS		2001 Duti 11.	ion.	तब	\$5.00 Added	to Fees	ANGES TO OFFI	lorida Dep	partment of S	tate
TITLE NAME	PD MCCOUR	OFFICERS AND DIF	RECTORS	Trust Fund C	11. TITLE	ion.	PD Jac	\$5.00 Added	to Fees	ANGES TO OFFI	lorida Dep	DIRECTORS IN	tate
TITLE	PD MCCOUR 520 SW 1	OFFICERS AND DIF RT, JIM AVENUE		Trust Fund C	11. TITLE NAMI	E ET ADDRESS	700 200	\$5.00 Added	NS/CH/	ANGES TO OFFI	lorida Dep	DIRECTORS IN	tate
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD MCCOUR 520 SW 1 HALLAND	OFFICERS AND DIF RT, JIM AVENUE DALE BEACH, FL 33009		Trust Fund C	11. TITLE NAMI STRE CHY-	ET ADDRESS	PD Jac 2008	\$5.00 Added	N.E.	ANGES TO OFFI hillip 10 et 33179	lorida Dep	DIRECTORS IN	tate
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD MCCOUR 520 SW 1 HALLAND VD GUSTAFS	OFFICERS AND DIF OFFICERS AND DIF RT, JIM AVENUE DALE BEACH, FL 33009 SON, JAMES		Trust Fund C	11. TITLE NAMI STRE CITY- TITLE	E E ET ADDRESS - ST-ZIP	DIV DIV VDV	\$5.00 Added ADDITION WSO ALL AMI	N.E.	ANGES TO OFFI HILLIP 10 CT 33179	lorida Dep	DIRECTORS IN Change	I 10 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD MCCOUR 520 SW 1 HALLAND VD GUSTAFS 4480 SW	OFFICERS AND DIF RT, JIM AVENUE DALE BEACH, FL 33009		Trust Fund C	11. TITLE NAMI STRE CITY- TITLE NAMI STRE	ET ADDRESS	PD Jac 303 MIC VD VD VD VD VD VD	\$5.00 Added ADDITION ASO ALL AMI	N.E. RICH	ANGES TO OFFI hillip 10 et 33179 IRDO 12 CX	lorida Dep	DIRECTORS IN Change	I 10 Addition
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SIGNATURE Bienadette L. Wilson Bernadette L. Wilson 4-10-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date