

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 707067 (5)

1. Corporation Name

Ocala Optimist Club Inc.
322 S. E. 31st Terrace
Ocala, Florida 34471-2821

Principal Place of Business

Mailing Address

3. Date Incorporated or Qualified
3/30/64

3a. Date of Last Report
?

2. Principal Place of Business

2a. Mailing Address

21 Ocala/Marion County

26 same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number

51-0219166

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

S. B. Brooks
322 S. E. 31st Terrace
Ocala, Florida 34471-2821

Ph: 352-694-3377

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 617.0503, Florida Statutes.

SIGNATURE

S. B. Brooks

(NOTE: Registered Agent signature required when reinstating)

3/28/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME Orlando Moreno
STREET ADDRESS 3801 S. E. 21st Place
CITY-ST-ZIP Ocala, Florida 34471

TITLE ☐ DELETE

NAME V. Pres.
STREET ADDRESS Wayne Avalon
CITY-ST-ZIP 1228 N. E. 39th Road
Ocala, Florida 34470

TITLE ☐ DELETE

NAME V. Pres.
STREET ADDRESS Donis Tylen
CITY-ST-ZIP 3929 S. E. 10th
Ocala, Florida 34471

TITLE ☐ DELETE

NAME S/T
STREET ADDRESS Charles T. Dixon Sr.
CITY-ST-ZIP 1315 S. E. 49th Avenue
Ocala, Florida 34471

TITLE ☐ DELETE

NAME Dir.
STREET ADDRESS Joyce Cole
CITY-ST-ZIP 651 N. E. 59th Street
Ocala, Florida 34470

TITLE ☐ DELETE

NAME Dir.
STREET ADDRESS Bonnie Moreno
CITY-ST-ZIP 3801 S. E. 21st Place
Ocala, Florida 34471

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

Dir.
Irving Zahn
2945 S. W. 32nd Avenue
Ocala, Florida 34474

Dir.
H. L. Hannell Sr.
1142 S. E. 14th Street
Ocala, Florida 34471

Dir.
Don Tylen
3929 S. E. 10th Avenue
Ocala, Florida 34471

Ex-Officio
S. B. Brooks
322 S. E. 31st Terrace
Ocala, Florida 34471-2821

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4/9/96
JR

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 or changed, or on an attachment with an address.

SIGNATURE: *Orlando Moreno* Orlando Moreno President 352-237-2111
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone Ex 235

CR2E037 (12/95)