

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION  
ANNUAL REPORT  
**1996**



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

**DOCUMENT # 731033 (7)**  
1. Corporation Name  
**THE OPTIMIST CLUB OF PLANT CITY, FLORIDA, INC.**



Principal Place of Business Mailing Address  
P O BOX 1755 PLANT CITY FL 33564 P O BOX 1755 PLANT CITY FL 33564

3. Date Incorporated or Qualified **11/01/1974** 3a. Date of Last Report **05/01/1995**

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 % STEPHEN L. EVANS, R.A.  
22 City & State 27 104 N. THOMAS ST.  
23 Zip 28 PLANT CITY FL  
24 Country 29 33566 30 U.S.A.

4. FEI Number **59-6155184** 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  
BUZBEE, JAMES H.  
114 S. COLLINS ST  
PLANT CITY FL 33566

10. Name and Address of New Registered Agent  
81 Name **STEPHEN L. EVANS**  
82 Street Address (P.O. Box Number is Not Acceptable)  
83 **104 N. THOMAS ST**  
84 City **PLANT CITY** FL 85 Zip Code **33566**

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 obligation of, Section 617.0503, Florida Statutes.

SIGNATURE *Stephen L. Evans* DATE **4/24/96**

12. OFFICERS AND DIRECTORS

TITLE	ST HICKS JR., STUART Y.	<input type="checkbox"/> DELETE
NAME	408 W HERRING ST	
STREET ADDRESS	PLANT CITY FL	
CITY-ST-ZIP		
TITLE	VP HIPPLER, DOUG	<input type="checkbox"/> DELETE
NAME	1704 HORSESHOE DR	
STREET ADDRESS	PLANT CITY FL	
CITY-ST-ZIP		
TITLE	VP KENNEDY, STEVE	<input type="checkbox"/> DELETE
NAME	5836 N DORMANY RD	
STREET ADDRESS	PLANT CITY FL	
CITY-ST-ZIP		
TITLE	P BALDWIN, TOM	<input type="checkbox"/> DELETE
NAME	4226 BARRET AVE	
STREET ADDRESS	PLANT CITY FL	
CITY-ST-ZIP		
TITLE	D BATLEY, JEFF	<input type="checkbox"/> DELETE
NAME	2626 BRIDLE DR	
STREET ADDRESS	PLANT CITY FL	
CITY-ST-ZIP		
TITLE	D KNOTTS, ANDY	<input type="checkbox"/> DELETE
NAME	701 N WARNELL ST	
STREET ADDRESS	PLANT CITY FL	
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	<b>PRESIDENT</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	<b>PAST-PRESIDENT</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	<b>VICE-PRESIDENT</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	<b>900001802239</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	<b>-05/01/96--01007--01</b>	
6.3 STREET ADDRESS	<b>***61.25</b>	
6.4 CITY-ST-ZIP		

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, changed, or on an attachment with an address.

SIGNATURE: *Stuart Y Hicks* DATE **4/17/96** Daytime Phone # **813-754-8804**

CR2E037 (12/95)