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**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N98000001051

1. Corporation Name

OPTIMIST CLUB OF PENSACOLA BEACH, INC.

Principal Place of Business
1 W. GALVEZ CT.
PENSACOLA BCH FL 32561

Mailing Address
P. O. BOX 1014
GULF BREEZE FL 32562-1014



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/20/1998	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-3564652	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24	Country	29	Country		

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
ZAHM, RONALD J 114 FAIRPOINT DR. GULF BREEZE FL 32561				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

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				(NOTE: Registered Agent signature required when reinstating)				DATE															
12. OFFICERS AND DIRECTORS												13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12											
TITLE	PD	<input checked="" type="checkbox"/> DELETE										1.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition									
NAME	WIRTH, THOMAS C											1.2 NAME	RUSS MANN										
STREET ADDRESS	1 W. GALVEZ CT.											1.3 STREET ADDRESS	1020 FT. PICKENS RD										
CITY-ST-ZIP	PENSACOLA BCH FL 32561											1.4 CITY-ST-ZIP	PENSACOLA BEACH FL, 32561										
TITLE	VD	<input checked="" type="checkbox"/> DELETE										2.1 TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition									
NAME	CIEUTAT, LYNN											2.2 NAME	RONALD J. ZAHM										
STREET ADDRESS	1311 MALDONADO DR.											2.3 STREET ADDRESS	114 FAIRPOINT DR.										
CITY-ST-ZIP	PENSACOLA BCH FL 32561											2.4 CITY-ST-ZIP	GULF BREEZE, FL. 32561										
TITLE	SD	<input type="checkbox"/> DELETE										3.1 TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition									
NAME	WATSON, BETTIE L											3.2 NAME	LOUISE GREENLEY										
STREET ADDRESS	1308 E. BELMONT ST.											3.3 STREET ADDRESS	2132 CLUBHOUSE DRIVE										
CITY-ST-ZIP	PENSACOLA FL 32501											3.4 CITY-ST-ZIP	WILLIAM, ALABAMA 36549										
TITLE	TD	<input type="checkbox"/> DELETE										4.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition									
NAME	DEUKER, CAROL A											4.2 NAME	APRIL HARGROVE										
STREET ADDRESS	1100 FT. PICKENS RD., #E5											4.3 STREET ADDRESS	500 MALDONADO DRIVE										
CITY-ST-ZIP	PENSACOLA BCH FL 32561											4.4 CITY-ST-ZIP	PENSACOLA BEACH, FL, 32561										
TITLE	D	<input type="checkbox"/> DELETE										5.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition									
NAME	BRANNON, THERESE											5.2 NAME	PAT AYRES										
STREET ADDRESS	1652 BULEVAR MAYOR, F-2											5.3 STREET ADDRESS	900 FT. PICKENS RD, APT # 611										
CITY-ST-ZIP	PENSACOLA BCH FL 32561											5.4 CITY-ST-ZIP	PENSACOLA BEACH, FL. 32561										
TITLE	D	<input checked="" type="checkbox"/> DELETE										6.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition									
NAME	FLANAGAN, MAURENE											6.2 NAME	MIKE STEBBINS										
STREET ADDRESS	9 ENSENADA QUATRO											6.3 STREET ADDRESS	10244 SUGAR CREEK PL.										
CITY-ST-ZIP	PENSACOLA FL 32561											6.4 CITY-ST-ZIP	PENSACOLA, FL 32514										

14. 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 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Ronald J. Zahm* **RONALD J. ZAHM** 2/17/99 (850) 932-6405
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037: (1/98)