

FILED
May 13, 1999 8:00 am
Secretary of State

05-13-1999 90023 023 ****61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # N98000002652 ✓

1. Corporation Name

THE OPTIMIST CLUB FOUNDATION OF SANIBEL CAPTIVA,
INC.

Principal Place of Business

1067 SANDCASTLE ROAD
SANIBEL ISLAND FL 33957

Mailing Address

POST OFFICE BOX 1370
SANIBEL ISLAND FL 33957



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

3. Date Incorporated or Qualified

05/04/1998

4. FEI Number

65 086 2589

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

9. Name and Address of Current Registered Agent

BASHER, JOHN
1067 SANDCASTLE ROAD
SANIBEL ISLAND FL 33957

10. Name and Address of New Registered Agent

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

John Basher JOHN B. BASHER

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
D	ARONOFF, MARK	9401 BEVERLY LANE	SANIBEL ISLAND FL 33957	<input type="checkbox"/>
D	HOLM, THOR	2125 S.W. 47TH TERRACE	CAPE CORAL FL 33914	<input checked="" type="checkbox"/>
D	JURCZSAK, J. WALTER	1066 SAND CASTLE ROAD	SANIBEL ISLAND FL 33957	<input checked="" type="checkbox"/>
D	GOODMAN, ARNOLD	490 OLD TRAIL ROAD	SANIBEL ISLAND FL 33957	<input type="checkbox"/>
D	JURA, ROBERT	223 PALM LAKE ROAD	SANIBEL ISLAND FL 33957	<input type="checkbox"/>
D	THEISS, NOLA	1360 JAMAICA DRIVE	SANIBEL ISLAND FL 33957	<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P	1.2 NAME	JOHN TURANSKY	1.3 STREET ADDRESS	233 ROBINWOOD CIRCLE	1.4 CITY-ST-ZIP	SANIBEL FL 33957	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
2.1 TITLE	VP	2.2 NAME	RICHARD M. CURRY	2.3 STREET ADDRESS	PO BOX 229	2.4 CITY-ST-ZIP	SANIBEL FL 33957	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
3.1 TITLE	D	3.2 NAME	KISA BILSKA	3.3 STREET ADDRESS	2426 IVY AVE	3.4 CITY-ST-ZIP	FT. MYERS FL 33907	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
4.1 TITLE	D	4.2 NAME	JACQUE OWENS	4.3 STREET ADDRESS	1098 SAND CASTLE RD	4.4 CITY-ST-ZIP	SANIBEL FL 33957	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
5.1 TITLE	S/T	5.2 NAME	JOHN BASHER	5.3 STREET ADDRESS	1067 SAND CASTLE RD	5.4 CITY-ST-ZIP	SANIBEL FL 33957	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
6.1 TITLE		6.2 NAME		6.3 STREET ADDRESS		6.4 CITY-ST-ZIP		<input type="checkbox"/> Change	<input type="checkbox"/> Addition

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:

John Basher REQUIRED

4/12/99

941 3950739

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOHN B. BASHER

Date

Daytime Phone

CR2E037 (11/98)