2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N98000001051

114 FAIRPOINT DR GULF

GULF BREEZE, FL 32561

1. Entity Name OPTIMIST CLUB OF PENSACOLA BEACH, INC. Mailing Address Principal Place of Business

PO BOX 1014

GULF BREEZE, FL 32562-1014

FILED Jul 12, 2004 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

CR2E037 (10/03) 07062004 No Chg-NP

4. FEI Number		Applied For
36-4088818	_	Not Applicable
5. Certificate of Status Desired	· 🗆	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ZAHM, RONALD J 114 FAIRPOINT DR. GULF BREEZE, FL 32561

DO NOT WRITE IN THIS SPACE

		***************************************		41.4	
	tions of registered agent.		<u> </u>		th, in the State of Florida. I am familiar with, and accept
B	Signature. Types or printed name of registered agent and Filling Fee is \$61.25 tue by September 5, 2004	Bection Campaign Financia Trust Fund Contribution.		\$5.00 May Be Added to Fees	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD REYNOLDS, STUART 362 GULFBREEZE PKWY GULF BREEZE, FL 32561	RECTORS	.	Q	1000000165288 17/)2/64-80007-014 61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD TURK, CAROLYN 1600 VIA DE LUNA PENSACOLA BEACH, FL 32561				· —
TITLE NAME SYREET ADDRESS CITY-SI-ZIP	VD LANZA, LORENE 10 SABINE DR PENSACOLA BCH, FL 32561			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD TURK, KENNETH 1600 VIA DE LUNA GULF BREEZE, FL 32561			IN '	THIS SPACE
TITLE HAME STREET ADDRESS CITY-ST-ZIP	SD BETTY, NEALE V 2288 BALBOA CT, NAVARRE, FL 32566	<u>.</u>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRANNON, THERESE 1625 BULEVAR MAYOR F2 PENSACOLA BEACH, FL 32561				
12. I hereby indicated	certify that the information supplied with the for this report or supplemental report is true.	s tiling does not quality for the exemp se and accurate and that my signature	tion state shall ha	d in Section 119.07(3); ve the same legal effect	(i), Florida Statutes. I further certify that the information of 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.