2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731033

Entity Name: THE OPTIMIST CLUB OF PLANT CITY, FLORIDA, INC.

Current Principal Place of Business:

1702 HORSESHOE DRIVE PLANT CITY, FL 33566

Current Mailing Address:

PO BOX 1755 PLANT CITY, FL 33564

FEI Number: 59-6155184

Name and Address of Current Registered Agent:

WOODS, PAUL DMR 1702 HORSESHOE DR PLANT CITY, FL 33566 US

Date

FILED

Certificate of Status Desired: Yes

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Officer/Director Detail :

Tit	tle	PRESIDENT	Title	ST
Na	ame	HOLLAND, JACK	Name	WOODS, PAUL D
Ac	ddress	PO BOX 1201	Address	1702 HORSESHOE DRIVE
Ci	ty-State-Zip:	PLANT CITY FL 33564	City-State-Zip:	PLANT CITY FL 33566
Tit	tle	VP	Title	DIRECTOR
Na	ame	HICKS, STUART Y	Name	WILLIAMSON, MICHAEL
Ac	ddress	2506 DORENE DRIVE	Address	2608 E SAM ALLEN ROAD
Ci	ty-State-Zip:	PLANT CITY FL 33563	City-State-Zip:	PLANT CITY FL 33565
Tit	tle	DIRECTOR	Title	PAST PRESIDENT
Na	ame	ARNOLD, WALTER	Name	ARNOLD, JEFFREY
Ac	ddress	1305 W SANDALWOOD DR S	Address	2406 CLUBHOUSE DRIVE
Ci	ty-State-Zip:	PLANT CITY FL 33566	City-State-Zip:	PLANT CITY FL 33566

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: PAUL WOODS

SECRETARY TREASURER 03/19/2017

Electronic Signature of Signing Officer/Director Detail