

**2013 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**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

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

*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

Date

**Officer/Director Detail :**

Title D  
Name ROBBINS, DAVE  
Address 4121 TANNER RD  
City-State-Zip: DOVER FL 33527

Title ST  
Name WOODS, PAUL D  
Address 1702 HORSESHOE DRIVE  
City-State-Zip: PLANT CITY FL 33566

Title D  
Name HICKS, STUART YMR.  
Address 2508 SAM ALLEN ROAD EAST  
City-State-Zip: PLANT CITY FL 33563

Title P  
Name STOTTLEMYER, PATRICK  
Address 4004 ASTON PL  
City-State-Zip: PLANT CITY FL 33566

Title D  
Name ARNOLD, WALTER  
Address 1305 W SANDALWOOD DR S  
City-State-Zip: PLANT CITY FL 33566

Title D  
Name ARNOLD, JEFFREY  
Address 4310 BARRET AVENUE  
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 D WOODS**

**AEC/TREAS**

**04/19/2013**

Electronic Signature of Signing Officer/Director Detail

Date