

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731033

FILED
Apr 26, 2015
Secretary of State
CC6869740782

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 WILLIAMSON, MICHAEL
Address 2608 E SAM ALLEN ROAD
City-State-Zip: PLANT CITY FL 33565

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

ST

04/26/2015

Electronic Signature of Signing Officer/Director Detail

Date