

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 737293

**Entity Name:** OPTIMIST CLUB OF GULF BREEZE, FLORIDA, INC.

**Current Principal Place of Business:**

112 WINDSOR PLACE  
GULF BREEZE, FL 32561

**Current Mailing Address:**

P. O. BOX 687  
GULF BREEZE, FL 32562

**FEI Number: 23-7008079**

**Certificate of Status Desired: Yes**

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

MOLLER, BETTY  
2908 CORAL STRIP PKWY  
GULF BREEZE, FL 32563 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: BETTY MOLLER**

**01/27/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            MEISTER, MARK  
Address        3005 ROSA DEL VISTA  
City-State-Zip: GULF BREEZE FL 32563

Title            TREASURER  
Name            MOLLER, BETTY  
Address        2908 CORAL STRIP PKWY  
City-State-Zip: GULF BREEZE FL 32563

Title            SECRETARY  
Name            FEDEROVICH, PETER N  
Address        212 AZALEA STREET  
City-State-Zip: GULF BREEZE FL 32561

Title            DIRECTOR  
Name            RHODES, VERNE  
Address        3731 TIGER POINT BLVD  
City-State-Zip: GULF BREEZE FL 32563

Title            DIRECTOR  
Name            ANDREWS, DEBORAH  
Address        414 SHORELINE DR  
City-State-Zip: GULF BREEZE FL 32561

Title            DIRECTOR  
Name            NAILE, TOM  
Address        112 WINDSOR PL  
City-State-Zip: GULF BREEZE FL 32561

Title            DIRECTOR  
Name            PEDRO, RHONDA L  
Address        4089 SOUNDPOINT DR  
City-State-Zip: GULF BREEZE FL 32563

*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: BETTY MOLLER**

**TREASURER**

**01/27/2024**

Electronic Signature of Signing Officer/Director Detail

Date