2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737293

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

FILED Feb 15, 2019 Secretary of State 0020224140CC

Current Principal Place of Business:

1110 GULF BREEZE PARKWAY GULF BREEZE. FL 32561

Current Mailing Address:

P. O. BOX 687

GULF BREEZE. FL 32562

FEI Number: 23-7008079 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STANFORD, WILLIAM 1200 WILLOWOOD LANE 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: WILLIAM STANFORD 02/15/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title	DIRECTOR	Title	TREASURER
Name	MEISTER, MARK	Name	HENRIQUES, DOUG

Address 3005 ROSA DEL VISTA Address 1337 AUTUMN BREEZE CIRCLE

City-State-Zip: GULF BREEZE FL 32563 City-State-Zip: GUFL BREEZE FL 32563

Title SECRETARY Title DIRECTOR

NameFEDEROVICH, PETER NNameSTANFORD, WILLIAMAddress212 AZALEA STREETAddress1200 WILLOWOOD LANECity-State-Zip:GULF BREEZE FL 32561City-State-Zip:GULF BREEZE FL 32563

Title DIRECTOR Title PRESIDENT

NameRHODES, VERNENameANDREWS, DEBORAHAddress3731 TIGER POINT BLVDAddress414 SHORELINE DRCity-State-Zip:GULF BREEZE FL 32563City-State-Zip:GULF BREEZE FL 32561

TitleDIRECTORTitlePRESIDENTNameNEWELL, LISANameNAILE, TOMAddress1374 WHISPER BAY BLVDAddress112 WINDSOR PL

City-State-Zip: GULF BREEZE FL 32563 City-State-Zip: GULF BREEZE FL 32561

Continues on page 2

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: WILLIAM STANFORD DIRECTOR 02/15/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name MERRILL, RHONDA L

Address 1382 PLAYERS CLUB CIRCLE

City-State-Zip: GULF BREEZE FL 32563