

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 14, 2008 8:00 am
Secretary of State

04-14-2008 90033 047 ****61.25



DOCUMENT # 704575

1. Entity Name

THE OPTIMIST CLUB OF PANAMA CITY, INC.

Principal Place of Business

3340 ROBINSON BAYOU CIRCLE
 P.O. BOX 15295
 PANAMA CITY FL 32406

Mailing Address

3340 ROBINSON BAYOU CIRCLE
 P.O. BOX 15295
 PANAMA CITY FL 32406



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E037 (10/07)

City & State

City & State

4. FEI Number

59-6138414

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~RATHBURN, CARLISLE~~
 3340 ROBINSON BAYOU CIRCLE
 PANAMA CITY FL 32405

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent Signature is required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	MOREL, WILLIAM E	
STREET ADDRESS	1400 MASSACHUSETTS AVE	
CITY-ST-ZIP	LYNN HAVEN FL 32444	
TITLE	PD	<input type="checkbox"/> Delete
NAME	JONES, JOYCE	
STREET ADDRESS	1400 MASSACHUSETTS AVE	
CITY-ST-ZIP	LYNN HAVEN FL 32444	
TITLE	STD	<input type="checkbox"/> Delete
NAME	RATHBURN, CARLISLE B	
STREET ADDRESS	3340 ROBINSON BAYOU CR	
CITY-ST-ZIP	PANAMA CITY FL 32405	
TITLE	D	<input type="checkbox"/> Delete
NAME	DRYDALE, ADAM W	
STREET ADDRESS	886 PREMIER DR	
CITY-ST-ZIP	PANAMA CITY FL 32401	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	TUGGLE, RICHARD B	
STREET ADDRESS	122 QUEENS CR	
CITY-ST-ZIP	PANAMA CITY FL 32405	
TITLE	D	<input type="checkbox"/> Delete
NAME	DAY, JAMES H	
STREET ADDRESS	2328 EAST BALDWIN RD	
CITY-ST-ZIP	PANAMA CITY FL 32405	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PAST PRESIDENT DIRECTOR	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Carlisle B. Rathburn Jr.*
 CARLISLE B. RATHBURN JR.

MARCH 31 2008 850-7850534