

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 04, 2004 8:00 am
Secretary of State

02-04-2004 90060 041 ****61.25

DOCUMENT # 705122

1. Entity Name

**THE BREAKFAST OPTIMIST CLUB OF DOWNTOWN
TAMPA, FLORIDA, INCORPORATED**



Principal Place of Business

% LAWRENCE SIEGEL
8714 HIGHLAND AVE.
TAMPA FL 33604

Mailing Address

% LAWRENCE SIEGEL
8714 HIGHLAND AVE.
TAMPA FL 33604

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**SIEGEL, LAWRENCE
8714 HIGHLAND AVE.
TAMPA FL 33604**

7. Name and Address of New Registered Agent

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 required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2004**

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 VP
NAME ERNST, PAT
STREET ADDRESS 5105 ZION ST.
CITY-ST-ZIP TAMPA FL 33611 ☐ Delete

TITLE ST
NAME SIEGEL, MARY A
STREET ADDRESS 8714 N HIGHLAND AVE
CITY-ST-ZIP TAMPA FL 33604 ☐ Delete

TITLE P
NAME SIEGEL, LAWRENCE
STREET ADDRESS 8714 HIGHLAND AVE.
CITY-ST-ZIP TAMPA FL 33604 ☐ Delete

TITLE D
NAME REID, THOMAS H
STREET ADDRESS P.O. BOX 273056
CITY-ST-ZIP TAMPA FL 33688 ☐ Delete

TITLE D
NAME COLTER, ALLISON J
STREET ADDRESS 502 FREMONT AVE #1418
CITY-ST-ZIP TAMPA FL 33606 ☐ Delete

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D
NAME COTLER, ALLISON J.
STREET ADDRESS 4115 W. TACON ST.
CITY-ST-ZIP TAMPA, FL 33629 ☒ Change ☐ Addition

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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CITY-ST-ZIP

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CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: LAWRENCE SIEGEL

Lawrence Siegel

01/30/04 (813) 933-1929

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #