2006 NOT FOR PROFIT CORPORATION

ANNUAL REPORT (AR) DOCUMENT # 705483

CHE TO

FILED Mar 15, 2006 8:00 am Secretary of State

1. Entity Name				03-15-2006 90097 027 ****61.25		
HIGH NO	OON OPTIMIST CLUB OF S	T. PETERSBURG,				
Principal Place of Business Maili		Mailing Address				
392 BOCA CIEGA PT. BLVD. NO. 392 BOCA CIEGA I MADEIRA BEACH FL 33708 MADEIRA BEACH F		392 BOCA CIEGA PT. MADEIRA BEACH FL 3	BLVD. NO. 33708			
2. Principal	Place of Business	3. Mailing Address	<u></u>		DII BIBII BIBII BIBII BIBILIBI SI 1981	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		1st MOORE CR2E0	37 (10/05)	
City & State		City & State		4. FEI Number 59-6166679	Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent		
}			Name //	7A.		
RIDINGS, JAMES C 392 BOCA CIEGA PT. BLVD NO. MADEIRA BCH FL 33708			Street Addre	Street Address (P.O. Box Number is Not Acceptable)		
MA	ADEIRA BUM FL 33708					
			City	F	Zip Code	
		for the purpose of changing its	registered office or reg	istered agent, or both, in the State of Florida. I a	m familiar with, and accept	
the obliga	ations of registered agent.	٨		n .		
SIGNATURE	JAMES C Ri	DINGS Ja	ment	idine 3/1	106	
JOIGHATORE			* · · · · · · · · · · · · · · · · · · ·			
ł	Signature, typed or printed name of registered age	int and little if applicable (NOTI	E: Registered Agent signature rec	puired when reip Skiing) DATE	Ę	
	and the second second second		E: Registered Agent signature rec			
	FILE NOW: FEE IS \$61.25 Due By May 1, 2006	18 TO 1	mpaign Financing	\$5.00 May Be Make Che	eck Payable to artment of State	
	FILE NOW: FEE IS \$61.25 Due By May 1, 2006	9. Election Car Trust Fund C	mpaign Financing Contribution.	\$5.00 May Be Added to Fees Florida Dep	eck Payable to artment of State	
10.	FILE NOW: FEE IS \$61.25 Due By May 1, 2006	9. Election Car Trust Fund C	mpaign Financing Contribution.	\$5.00 May Be Added to Fees Florida Dep	DIRECTORS IN 10	
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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.

RIDINGS 3/1/06 727-398-7369 SIGNATURE: