

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707213

FILED
Apr 13, 2007
Secretary of State

Entity Name: OPTIMIST CLUB OF MIAMI SHORES, INC.

Current Principal Place of Business:

P.O. BOX 4464
HOLLYWOOD, FL 330834464 US

New Principal Place of Business:

2420 SW 81ST AVE
UNIT #401
DAVIE, FL 333245749 US

Current Mailing Address:

P.O. BOX 4464
HOLLYWOOD, FL 330834464 US

New Mailing Address:

FEI Number: 59-2261788 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBBINS, MARY LOU
2420 SW 81ST AVE
UNIT #401
DAVIE, FL 333245749 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ARONSON, BUDDY
Address: 1300 ST CHARLES PLACE APT 607
City-St-Zip: PEMBROKE PINES, FL 33026

Title: VPD () Delete
Name: CANNY-MATTHEWS, HELEN
Address: 1270 RED BIRD AVE
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: SD () Delete
Name: ROBBINS, MARY LOU
Address: 2420 SW 81ST AVE., UNIT 401
City-St-Zip: DAVIE, FL 333245749

Title: TD () Delete
Name: PERLMAN, RAYMOND
Address: 3300 NORTH STATE ROAD 7
City-St-Zip: HOLLYWOOD, FL 33021

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CANNY-MATTHEWS, HELEN
Address: 1270 RED BIRD AVE
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: VPD (X) Change () Addition
Name: ROMANI, RONALD
Address: 10931 NE 6TH AVE
City-St-Zip: MIAMI, FL 33161

Title: STD (X) Change () Addition
Name: ROBBINS, MARY LOU
Address: 2420 SW 81ST AVE., UNIT 401
City-St-Zip: DAVIE, FL 333245749

Title: D (X) Change () Addition
Name: PERLMAN, RAYMOND
Address: 3300 NORTH STATE ROAD 7
City-St-Zip: HOLLYWOOD, FL 33021

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARY LOU ROBBINS

STD

04/13/2007

Electronic Signature of Signing Officer or Director

Date