2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#712294

FILED Feb 22, 2010 Secretary of State

Entity Name: THE OPTIMIST CLUB OF MARIANNA, FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

2998 CALEDONIA ST. 2998 CALEDONIA ST.

MARIANNA, FL 32447 US MARIANNA, FL 32446 US

Current Mailing Address: New Mailing Address:

2998 CALEDONIA ST. 2998 CALEDONIA ST.

MARIANNA, FL 32447 US MARIANNA, FL 32446 US

FEI Number: 59-6178206 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SWAILS, JAMES L. 2998 CALEDONIA ST.

MARIANNA, FL 32446 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VP

Name: PORTERFIELD, JOHN Address: 2939 CHASE WAY City-St-Zip: MARIANNA, FL 32446

Title: VP

Name: SHEILDS, JEREMY
Address: 2977 SPRING ST
City-St-Zip: MARIANNA, FL 32446

Title: VP

Name: HASCHER, STANLEY R Address: 2871 MAGNOLIA BLOSSOM LN.

City-St-Zip: MARIANNA, FL 32446

Title: TS

Name: SWAILS, JAMES L Address: 2998 CALEDONIA ST. City-St-Zip: MARIANNA, FL 32446

Title: DIR

Name: MERCER, WADE

Address: 3246 DELLWOOD CYPRESS RD.

City-St-Zip: MARIANNA, FL 32446

Title: DIR

Name: HARRISON, RALPH
Address: 2393 RUSS RD.
City-St-Zip: MARIANNA, FL 32446

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: JAMES L. SWAILS S/T 02/22/2010