

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 23, 2002 8:00 am
Secretary of State

07-23-2002 90324 006 ****61.25

DOCUMENT # 713622

1. Entity Name

THE OPTIMIST CLUB OF MIRAMAR, INC.

Principal Place of Business

Mailing Address

~~6040 S.W. 23RD STREET~~
~~MIRAMAR FL 33023~~

PO BOX 260375
 PEMBROKE PINES FL 33026

2. Principal Place of Business

3. Mailing Address

PO BOX 260375

Suite, Apt. #, etc.
 Pembroke Pines FL

City & State
 33026 USA

Zip Country

Suite, Apt. #, etc.

City & State

Zip Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-6207991

Applied For

Not Applicable

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

BUTLER, SHERRI
8480 NW 16 STREET
PEMBROKE PINES FL 33024

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

Sherril Butler *Sherril Butler, Secretary*

7/12/02

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

(NOTE: Registered Agent signature required when reinstating)

DATE

After September 13, 2002,
min. will be \$236.25.

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	D	CLEMISHAW, TOM	1843 SW 173 AVE MIRAMAR FL 33029	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
	PD	ARROYO, DAVID	4131 OPEN WAY COOPER CITY FL 33026	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
	VP	FAUST, GLADYS	2405 JACKSON STREET HOLLYWOOD FL 33020	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
	TD	BROWN, PAT	2900 RIVER RUN CIRCLE WEST MIRAMAR FL 33025	<input type="checkbox"/>	TD	Pat Brown	18103 SW 20 Street Avenue MIRAMAR, FL 33029		<input checked="" type="checkbox"/>	<input type="checkbox"/>
	D	ARROYO, ANGEL	19122 NW 12 CT. PEMBROKE PINES FL 33029	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
	SD	BUTLER, SHERRI	8480 NW 16 STREET PEMBROKE PINES FL 33024	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>

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:

David Arroyo

7/12/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (4/02)