

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005 08:00 AM
Secretary of State

DOCUMENT # 730269

1. Entity Name
THE COCOA BEACH OPTIMIST CLUB, INC,



Principal Place of Business
PO BOX 165
CAPE CANAVERAL, FL 32920 US

Mailing Address
PO BOX 165
CAPE CANAVERAL, FL 32920 US



03182005 No Chg-NP CR2E037 (10/03)

4. FEI Number
23-7327055

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

CAMPBELL, GEORGE S 'BUD'
231 CORAL DR
CAPE CANAVERAL, FL 32920

**DO NOT WRITE
IN THIS SPACE**

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

Filing Fee is \$61.25
Due by May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U000000340698
04/28/05-80125-017 61.25

10. OFFICERS AND DIRECTORS

TITLE D
NAME CAMPBELL, GEORGE
STREET ADDRESS 231 CORAL DR
CITY-ST-ZIP CAPE CANAVERAL, FL 32920

TITLE ST
NAME CAMPELL, KIMBERLY
STREET ADDRESS 231 CORAL DR
CITY-ST-ZIP CAPE CANAVERAL, FL 32920

TITLE P
NAME WATSON, OTTO
STREET ADDRESS 223 COLUMBIA DR 301
CITY-ST-ZIP CAPE CANAVERAL, FL 32920

TITLE D
NAME CLEMENT, JANET
STREET ADDRESS 300 COLUMBIA DR # 2205
CITY-ST-ZIP CAPE CANAVERAL, FL 32920

TITLE D
NAME BUTZ, FRAN
STREET ADDRESS 545 GARFIELD AVE # 903
CITY-ST-ZIP COCOA BEACH, FL 32931

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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: *George S. Campbell*