

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730269

FILED
Feb 25, 2011
Secretary of State

Entity Name: THE COCOA BEACH OPTIMIST CLUB, INC,

Current Principal Place of Business:

231 CORAL DR
CAPE CANVERAL, FL 32920 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 165
CAPE CANVERAL, FL 32920 US

New Mailing Address:

FEI Number: 23-7327055 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CAMPBELL, GEORGE S 'BUD'
231 CORAL DR
CAPE CANAVERAL, FL 32920 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: D
Name: ETHERIDGE, DIANA
Address: 607 N TROPICAL TRAIL
City-St-Zip: MERRITT ISLAND, FL 32953

Title: S
Name: CAMPBELL, KIMBERLY
Address: 231 CORAL DR
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: D
Name: WATSON, OTTO
Address: 261 CAPE SHORES DR #A
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: P
Name: BEVIS, ROBERT
Address: 25 COLONIAL DR
City-St-Zip: COCOA BEACH, FL 32931

Title: T
Name: RASMUSSEN, ERIK
Address: 300 COLUMBIA DR., #3208
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: D
Name: SKYWARK, GINNY
Address: 5805 N BANANA RIVER BLVD #1157
City-St-Zip: CAPE CANAVERAL, FL 32920

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: KIMBERLY A CAMPBELL

S

02/25/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date