

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731933

FILED
Jul 13, 2008
Secretary of State

Entity Name: THE OPTIMIST CLUB OF MIAMI LAKES, INC.

Current Principal Place of Business:

P. O. BOX 4034
MIAMI LAKES, FL 33014

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 4034
MIAMI LAKES, FL 33014

New Mailing Address:

FEI Number: 23-7033675 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GOMEZ, ROLAND
8100 OAK LANE #400
MIAMI LAKES, FL 33016 US

Name and Address of New Registered Agent:

GOMEZ, ROLAND
4300 BISCAYNE BLVD. SUITE 305
MIAMI, FL 33137 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

07/13/2008

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: CURRY, TERRY
Address: 14300 CYPRESS CT.
City-St-Zip: MIAMI LAKES, FL 33014

Title: PD () Delete
Name: MCCALL, JACK
Address: 15515 NW 83 AVE
City-St-Zip: MIAMI LAKES, FL 33016

Title: SD () Delete
Name: HAMILTON, JAMES
Address: 8528 GLENCHAIRN LN
City-St-Zip: MIAMI LAKES, FL 33014

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: HAMILTON, JAMES
Address: 8528 GLENCHAIRN LN
City-St-Zip: MIAMI LAKES, FL 33016

I hereby certify that the information supplied with this filing does not qualify 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: JAMES J. HAMILTON

Electronic Signature of Signing Officer or Director

PRES

07/13/2008

Date