2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED May 28, 2009 **DOCUMENT#735149** Secretary of State

Entity Name: OPTIMIST CLUB OF MIAMI SPRINGS, FLORIDA, INC.

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

1101 WREN AVENUE MIAMI, FL 33166

Current Mailing Address: New Mailing Address:

PO BOX 66-0071 MIAMI SPRINGS, FL 33266

FEI Number: 59-6155179 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LOB, GEORGE V SILVA, ANTONIO 860 PLOVER AVE 1298 ROBIN AVENUE

MIAMI SPRINGS, FL 33166 MIAMI SPRINGS, FL 33166 US 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: ANTONIO SILVA 05/28/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition MULET, GREGORIO MULET, GREGORIO Name: Name: 217 HUNTING LODGE DRIVE Address: 217 HUNTING LODGE DRIVE Address:

City-St-Zip: MIAMI SPRINGS, FL 33166 City-St-Zip: MIAMI SPRINGS, FL 33166

Title: VPD Title: (X) Change () Addition () Delete SILVA, TONY Name: SILVA, ANTONIO Name:

Address: 1298 ROBIN AVENUE Address: 1298 ROBIN AVENUE City-St-Zip: MIAMI SPRINGS, FL 33166 City-St-Zip: MIAMI SPRINGS, FL 33166

Title: PD () Delete Title: PPD (X) Change () Addition LOB, GEORGE LOB, GEORGE Name: Name:

860 PLOVER AVE Address: Address: 860 PLOVER AVE City-St-Zip: MIAMI, FL 33166 City-St-Zip: MIAMI, FL 33166

() Delete Title: SY Title: TD (X) Change () Addition

Name: KARPIS, ALEX Name: VICO, ROBERT Address: 1170 QUAIL AVENUE Address: 571 NIGHTINGALE AVE City-St-Zip: MIAMI SPRINGS, FL 33166 City-St-Zip: MIAMI SPRINGS, FL 33166

VPD Title: () Delete Title: () Change () Addition

LYCKE, TIM Name: Name: 272 PAYNE DRIVE Address: Address: City-St-Zip: MIAMI SPRINGS, FL 33166 City-St-Zip:

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: GEORGE V. LOB PPD 05/28/2009