

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737293

FILED
Jan 04, 2010
Secretary of State

Entity Name: OPTIMIST CLUB OF GULF BREEZE, FLORIDA, INC.

Current Principal Place of Business:

1110 GULF BREEZE PARKWAY
GULF BREEZE, FL 32561

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 687
GULF BREEZE, FL 32562

New Mailing Address:

FEI Number: 23-7008079

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

STANFORD, BILL
1200 WILLOWOOD LAND
GULF BREEZE, FL 32563 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: T
Name: STANFORD, BILL
Address: 1200 WILLOWOOD LANE
City-St-Zip: GULF BREEZE, FL 32563

Title: VP
Name: CIBULA, JIM
Address: 511 DRACENA WAY
City-St-Zip: GULF BREEZE, FL 32561

Title: D
Name: NAILE, TOM
Address: 314 ANDREWJACKSON TRAIL
City-St-Zip: GULF BREEZE, FL 32561

Title: D
Name: GRAY, CHARLES
Address: 1349 GREEN VISTA LANE
City-St-Zip: GULF BREEZE, FL 32563

Title: D
Name: CAMPBELL, AL
Address: 951 CORONADO DRIVE
City-St-Zip: GULF BREEZE, FL 32563

Title: P
Name: ADAMS, JOHN
Address: 2947 CORAL STRIP PKWY
City-St-Zip: GULF BREEZE, FL 32563

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: BILL STANFORD

TREA

01/04/2010

Electronic Signature of Signing Officer or Director

Date