## 2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

## Jul 12, 2004 8:00 am **Secretary of State DOCUMENT # 754008** 1. Entity Name 07-12-2004 90028 023 \*\*\*\*61.25 THE OPTIMIST CLUB OF MILTON, INC. Principal Place of Business: Mailing Address C/O ROBERT LAND 6020 MANDIE LANE C/O ROBERT LAND 6020 MANDIE LANE MILTON FL 32570 54061778 MILTON FL 32570 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) City & State City & State 4. FEI Number Applied For **NO-T APPLICABLE** Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LAND, ROBERT Street Address (P.O. Box Number is Not Acceptable) 6020 MANDSE LANE MILTON FL 32570 Zip Code 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 7-9-04 DATE (NOTE: Registered Agent signature required when reinstating) **\$5.00** May Be FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to Trust Fund Contribution. Due By May 1, 2004 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. Delete TITLE Change ☐ Addition TITLE LOUIS, RICH NAME NAME 6341 HAPPY LANE STREET ADDRESS STREET ADDRESS MILTON FL 32570 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition LAND, ROBERT NAME NAME 6020 MANDIE LANE STREET ADDRESS STREET ADDRESS MILTON FL CITY-ST-ZIP CITY-ST-ZIP Change \_\_\_ Addition ☐.Delete TITLE DEMPSEY, BILL NAME NAME 8771 HICKORY HAMMOCK RD STREET ADDRESS STREET ADDRESS MILTON FL CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE DEMPSEY, JANICE NAME NAME 8771 HICKORY HAMMOCK ROAD STREET ADDRESS STREET ADDRESS MILTON FL CITY-ST-ZIP CITY-ST-ZIP [] Change ☐ Addition ☐ Delete TITLE TITLE LAND, ROBERT NAME NAME 6020 MANDIE LANE STREET ADDRESS STREET ADDRESS MILTON FL 32570 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE BODAMER, CHARLES NAME NAME 7031 PINE BLOSSOM RD STREET ADDRESS STREET ADDRESS

FILED

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.

CITY-ST-ZIP

MILTON FL 32570

CITY-ST-71P

William Dempsey