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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 765856

1. Corporation Name

OPTIMIST CLUB OF MIAMI SHORES COMMUNITY BETTERMENT FUND, INC.

Principal Place of Business

P.O. BOX 530631
9999 N.E. 2ND AVENUE SUITE 216
MIAMI SHORES FL 33153
US

Mailing Address

P.O. BOX 530631
~~9999 N.E. 2ND AVENUE SUITE 216~~
MIAMI SHORES FL 33161
US



2. Principal Place of Business

21 Box 530631

Suite, Apt. #, etc.

22

City & State

23 Miami Shores, FL

Zip

24 33153

Country

25 Dade

2a. Mailing Address

26 Box 530631

Suite, Apt. #, etc.

27

City & State

28 Miami Shores, FL

Zip

29 33153

Country

30 Dade

3. Date Incorporated or Qualified

11/23/1982

4. FEI Number

59-2261788

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐ \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

YATES, WILLIAM O.
17 NE 109 STREET
MIAMI SHORES FL 33161

10. Name and Address of New Registered Agent

81 Name

Thomas E. Teems

82 Street Address (P.O. Box Number is Not Acceptable)

12225 NE 11 Place

83

84 City

North Miami, FL

85 Zip Code

33161

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Thomas Teems, Secy

Thomas Teems

2-9-99

DATE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME PEREZ, RAYMOND V.

STREET ADDRESS 180 NE 128 TERRACE

CITY-ST-ZIP NORTH MIAMI FL

TITLE PD ☐ DELETE

NAME LANCE, JERRY W

STREET ADDRESS 246 NE 102 STREET

CITY-ST-ZIP MIAMI SHORES FL

TITLE D ☒ DELETE

NAME EDWARDS, HAROLD L

STREET ADDRESS 7725 NE 8TH AVE

CITY-ST-ZIP MIAMI FL

TITLE VD ☐ DELETE

NAME ROMANI, RONALD C

STREET ADDRESS 10931 NE 6TH AVE

CITY-ST-ZIP MIAMI SHORES FL

TITLE S ☐ DELETE

NAME TEEMS, THOMAS E

STREET ADDRESS 12225 NE 11TH PLACE

CITY-ST-ZIP NORTH MIAMI FL 33161

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

Director

Lance, Jerry W.

246 NE 102 Street

Miami Shores, FL

Director

Smith, Sheldon, Jr.

440 Grand Concourse

Miami, FL

Secy

Teems, Thomas E.

12225 NE 11 Place

North Miami, FL

Director

Teems, Gail L.

12225 NE 11 Place

North Miami, FL

Pres

Kennedy, Lawrence, Jr.

156 NW 90 Street

Miami, FL

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Thomas Teems, Secy

Thomas Teems

2-9-99

305-895-3691

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (1/98)