



2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 08, 2006 8:00 am
Secretary of State

06-08-2006 90003 009 ****61.25

DOCUMENT # N01793 1. Entity Name OPTIMIST CLUB OF CAPE CORAL, INC.					
Principal Place of Business 5306 SKYLINE BLVD CAPE CORAL, FL 33914			Mailing Address PO BOX 101556 CAPE CORAL, FL 33914 US		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 23-7093958	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MCCULLOUGH, JOHN 1912 SE 4TH TERRACE CAPE CORAL, FL 33990				7. Name and Address of New Registered Agent Name Harry B Salzman Street Address (P.O. Box Number is Not Acceptable) 5306 Skyline Blvd City Cape Coral FL Zip Code 33914	
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 the obligations of registered agent.					
SIGNATURE Harry B Salzman <small>Signature, typed or printed name of registered agent and title if applicable.</small>				DATE June 5, 2006 <small>(NOTE: Registered Agent signature required when reinstating)</small>	
Filing Fee is \$61.25 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KHOL, PAUL 5306 SKYLINE BLVD CAPE CORAL, FL 33914	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST SALZMAN, HARRY B 5306 S MYLINE BLVD CAPE CORAL, FL 33914	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KROGULSKI, JACK 3720 SE 17TH PLACE CAPE CORAL, FL 33904	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARILYN, MCGEE 240 SE 6TH STREET CAPE CORAL, FL 33990	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KROGULSKI, JACK 3720 SE 17TH PLACE CAPE CORAL, FL 33904	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARILYN, MCGEE 240 SE 6TH STREET CAPE CORAL, FL 33990	<input checked="" type="checkbox"/> Delete			
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.					
SIGNATURE: Harry B Salzman Harry B Salzman 6/5/06 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					