2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000006561

Entity Name: OPTIMIST SPORTS CLUB OF S.W. FLORIDA INC.

FILED Jan 22, 2003 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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158 S.E. 5TH STREET CAPE CORAL, FL 33990

Current Mailing Address: New Mailing Address:

158 S.E. 5TH STREET CAPE CORAL, FL 33990

FEI Number: 61-1410137 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:

SCHMIDT, JUERGEN 158 S.E. 5TH STREET CAPE CORAL, FL 33990

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: D (X) Change () Addition
Name: SCHMIDT, JUERGEN
Address: 158 S.E. 5TH STREET

 Address:
 158 S.E. 5TH STREET
 Address:
 158 S.E. 5TH STREET

 City-St-Zip:
 CAPE CORAL, FL 33990
 City-St-Zip:
 CAPE CORAL, FL 33990

Title: Title: (X) Change () Addition () Delete ROTONDO, KIMBERLY Name: Name: SCHMIDT, MARCELLA Address: 158 S.E. 5TH STREET Address: 158 S.E. 5TH STREET City-St-Zip: CAPE CORAL, FL 33990 City-St-Zip: CAPE CORAL, FL 33990

Title: T () Delete Title: D (X) Change () Addition

 Name:
 JARVIS, BEVERLY
 Name:
 SCHMIDT, PETRA

 Address:
 158 S.E. 5TH STREET
 Address:
 158 S.E. 5TH STREET

 City-St-Zip:
 CAPE CORAL, FL 33990
 City-St-Zip:
 CAPE CORAL, FL 33990

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JUERGEN SCHMIDT D 01/22/2003