## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000005608

Entity Name: THE OPA-LOCKA OPTIMIST CLUB. INC

FILED Apr 30, 2004 Secretary of State

,		(Lectivity) Timiler Clob, iiv	<u> </u>		
Current Principal Place of Business:			New Princ	New Principal Place of Business:	
2100 BURLINGTON STREET OPA-LOCKA, FL 33054			777 SHAR	SHERBONDY PARK 777 SHARAZAD BLVD (BEHIND CITY HALL) OPA-LOCKA, FL 33054	
Current Mailing Address:			New Maili	New Mailing Address:	
P.O. BOX OPA-LOC	541065 KA, FL 33054				
FEI Number	: 90-0088320	FEI Number Applied For()	FEI Number Not App	licable ( ) Certificate of Status Desired ( )	
Name and	l Address of C	Current Registered Agent:	Name and	Address of New Registered Agent:	
	CORNEISE 174TH STREE 33054	Т			
	e named entity s e of Florida.	submits this statement for the p	ourpose of changing i	ts registered office or registered agent, or both,	
SIGNATUI	RE:				
	Electror	ic Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:			ADDITION	IS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P ( ) RUSSELL, JAN 1210 PERI STF OPA-LOCKA, F	REET	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	V ( ) AKINS, RANDO 2100 BURLING OPA-LOCKA, F	TON ST	Title: Name: Address: City-St-Zip:	V (X) Change ( ) Addition HARRIS, RODNEY 2230 NW 194TH TERR MIAMI GARDENS, FL 33056	
Title: Name: Address: City-St-Zip:	D ( ) WILLIAMS, DE 18821 NE 3RD MIAMI, FL 331	CT APT. 621	Title: Name: Address: City-St-Zip:	S (X) Change ( ) Addition WILLIAMS, DESHAWN 18821 NE 3RD CT APT. 621 MIAMI, FL 33179	
Title: Name: Address: City-St-Zip:	D () WEAVER, COR 3461 NW 174T MIAMI, FL 330	H STREET	Title: Name: Address: City-St-Zip:	T (X) Change () Addition WEAVER, CORNEISE 3461 NW 174TH STREET MIAMI, FL 33056	
Title: Name: Address: City-St-Zip:	D (X HOWARD, NEA 4351 NW 186T MIAMI, FL 330	H STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: DESHAWN WILLIAMS SEC 04/30/2004