2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001777

FILED Jan 07, 2010 Secretary of State

Entity Name: NORTHEAST JACKSON COUNTY OPTIMIST CLUB, INC. #60-700

Current Principal Place of Business: New Principal Place of Business:

5397 10TH AVE 5182 9TH AVE MALONE, FL 32445 MALONE, FL 32445

Current Mailing Address: New Mailing Address:

P O BOX 565 MALONE, FL 32445 P.O. BOX 565 MALONE, FL 32445

FEI Number: 90-0212450 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:

FADER, KAREN
5488 9TH STREET
MALONE, FL 32445 US
FADER, KAREN
999 EMERALD DRIVE
ALFORD, FL 32420 US

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: 01/07/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: FADER, KAREN
Address: 999 EMERALD DRIVE
City-St-Zip: ALFORD, FL 32420

Title:

Name: EARNEST, DENECIER L Address: 4783 HWY 2 City-St-Zip: MALONE, FL 32445

Title: VP

Name: WRIGHT, GENE
Address: 5253 10TH STREET
City-St-Zip: MALONE, FL 32445

Title: VF

Name: MURDOCK, MARY CAROL Address: P.O. BOX 153

City-St-Zip: MALONE, FL 32445

Title: 5

Name: PITMAN, PEGGY
Address: 5986 OLD US ROAD
City-St-Zip: MALONE, FL 32445

I hereby 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 all other like empowered.

SIGNATURE: DENECIER L EARNEST T 01/07/2010