

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001777

FILED  
Feb 22, 2012  
Secretary of State

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

**Current Principal Place of Business:**

5182 9TH AVE  
MALONE, FL 32445

**New Principal Place of Business:**

5507 FRIENDSHIP CHURCH RD.  
MALONE, FL 32445

**Current Mailing Address:**

P.O. BOX 565  
MALONE, FL 32445

**New Mailing Address:**

**FEI Number:** 90-0212450

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FADER, KAREN  
999 EMERALD DRIVE  
ALFORD, FL 32420 US

**Name and Address of New Registered Agent:**

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:**

Title: P  
Name: JACKSON, FLORENCE  
Address: P O BOX 725  
City-St-Zip: MALONE, FL 32445

Title: T  
Name: PITMAN, MARGARET H  
Address: 5986 OLD U.S. ROAD  
City-St-Zip: MALONE, FL 32445

Title: VP  
Name: MURDOCK, MARY CAROL  
Address: P O BOX 153  
City-St-Zip: MALONE, FL 32445

Title: VP  
Name: LONG, LINDA  
Address: 4834 DITTY ROAD  
City-St-Zip: BASCOM, FL 32423

Title: S  
Name: PITMAN, MARGARET  
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: MARGARET H. PITMAN

S/T

02/22/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date