

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006931

FILED
Feb 05, 2008
Secretary of State

Entity Name: NARANJA OPTIMIST CLUB, INC.

Current Principal Place of Business:

13795 SW 268 ST
NARANJA, FL 33032

New Principal Place of Business:

Current Mailing Address:

13795 SW 268 ST
NARANJA, FL 33032

New Mailing Address:

FEI Number: 26-0074403

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDGEComb, ROBIN C
13795 SW 268 ST
NARANJA, FL 33032 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: D () Delete
Name: EDGEComb, CAROLYN
Address: 13795 SW 268TH STREET
City-St-Zip: NARANJA, FL 33032

Title: D () Delete
Name: RAMKISSOON, PARSURAM
Address: 27077 SOUTH DIXIE HIGHWAY
City-St-Zip: NARANJA, FL 33032

Title: D () Delete
Name: ARROYO, FRANK
Address: 12355 SW 195TH TERRACE
City-St-Zip: MIAMI, FL 33177

Title: D () Delete
Name: EVANS-COLEMAN, ROSE L
Address: 20510 SW 122ND COURT
City-St-Zip: MIAMI, FL 33177

Title: P () Delete
Name: FORBES, KEN
Address: 25121 SW 120TH PL.
City-St-Zip: NARANJA, FL 33032

Title: D () Delete
Name: FRAIZER, ELEANOR
Address: 10345 SW 151ST TERRACE
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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City-St-Zip:

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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ROBIN EDGEComb

RA

02/05/2008

Electronic Signature of Signing Officer or Director

Date