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**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N05527

1. Corporation Name

SUNCOAST OPTIMIST CLUB OF SARASOTA, INC.



Principal Place of Business

2221 2ND ST
SARASOTA FL 34237
US

Mailing Address

PO BOX 1182
SARASOTA FL 34230
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country
24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country
29 30

3. Date Incorporated or Qualified

10/06/1984

4. FEI Number

59-2062290

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

MILLER, ROBERT L
517 SECOND STREET WEST
BRADENTON FL 34205

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VD ☒ DELETE
NAME JACKSON, JEFFREY H
STREET ADDRESS 3715-75TH AVE DR EAST
CITY-STATE-ZIP SARASOTA FL 34243

TITLE SD ☐ DELETE
NAME KLEIN, DOROTHY S
STREET ADDRESS 1015-12TH AVENUE WEST #35
CITY-STATE-ZIP PALMETTO FL

TITLE TD ☐ DELETE
NAME KELSO, H GEAN
STREET ADDRESS 3116 53RD ST
CITY-STATE-ZIP SARASOTA FL

TITLE PD ☐ DELETE
NAME PROFFITT, GEORFREY H.
STREET ADDRESS 2105 SOUTH BRINK AVE.
CITY-STATE-ZIP SARASOTA FL

TITLE D ☐ DELETE
NAME BINZ, BARRY
STREET ADDRESS 227 GRANT DRIVE
CITY-STATE-ZIP SARASOTA FL

TITLE VD ☐ DELETE
NAME JOHNSON, BARBARA
STREET ADDRESS 3656 KINGSTON BLVD
CITY-STATE-ZIP SARASOTA FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☐ Change ☒ Addition
1.2 NAME DLSON, LARS
1.3 STREET ADDRESS 1629 FIRST AVENUE
1.4 CITY-STATE-ZIP BRADENTON FL 34208

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP

4.1 TITLE VD ☒ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APRIL 21, 1999

941-359-1592

Date

Daytime Phone #

CR2E037 (11/98)