

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 07, 2004 8:00 am
Secretary of State

04-07-2004 90045 010 ****61.25

DOCUMENT # N05527

1. Entity Name

SUNCOAST OPTIMIST CLUB OF SARASOTA, INC.



Principal Place of Business

P.O. BOX 50482
SARASOTA FL 34232
US

Mailing Address

P.O. BOX 50482
SARASOTA FL 34232
US

34027891



MOORE CR2E037 (11/03)

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2062290

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MILLER, ROBERT L
717 MANATEE AVENUE WEST
SUITE 200
BRADENTON FL 34205

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE **STD** ☐ Delete
NAME **JACKSON, JANET M**
STREET ADDRESS **3060 DIVIDING CREEK DR**
CITY-ST-ZIP **SARASOTA FL 34232**

TITLE **D** ☐ Delete
NAME **KLEIN, DOROTHY S**
STREET ADDRESS **5026 WATER OAK DRIVE # 107**
CITY-ST-ZIP **BRADENTON FL 34207**

TITLE **PD** ☐ Delete
NAME **HIGHTOWER, RUSSELL**
STREET ADDRESS **3919 ELM STREET**
CITY-ST-ZIP **ELLENTON FL 34222**

TITLE **D** ☐ Delete
NAME **PROFFITT, GEORFREY H.**
STREET ADDRESS **2105 SOUTH BRINK AVE.**
CITY-ST-ZIP **SARASOTA FL 34239**

TITLE **VD** ☐ Delete
NAME **SCHROCK, ELIZABETH**
STREET ADDRESS **202 SUNWAY AVE.**
CITY-ST-ZIP **SARASOTA FL 34232**

TITLE **D** ☒ Delete
NAME **JOHNSON, BARBARA**
STREET ADDRESS **3656 KINGSTON BLVD**
CITY-ST-ZIP **SARASOTA FL 34238**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP **34237**

TITLE **PD** ☐ Change ☒ Addition
NAME **RAMON, JOSEPH J.**
STREET ADDRESS **4400 GALLUP AVE.**
CITY-ST-ZIP **SARASOTA FL 34233**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Janet M. Jackson

JANET M. JACKSON APRIL 1, 2004

941-359-1592

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #