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Feb 18 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N15091** (4)

1. Corporation Name

THE OPTIMIST CLUB OF DUNEDIN, FLORIDA, INC.

Principal Place of Business

**586 BAYWOOD DR. N
DUNEDIN FL 34698
US**

Mailing Address

**PO BOX 1731
DUNEDIN FL 34697-1731**

3. Date Incorporated or Qualified

05/23/1986

4. FEI Number

59-2573583

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 **25** **29** **30**

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**WALSTON, JAY
2032 PRINCETON AVE.
DUNEDIN FL 34698**

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 ☐ DELETE

**NAME
PST
WALSTON, JAY
STREET ADDRESS
2032 PRINCETON AVE.
CITY-ST-ZIP
DUNEDIN FL**

TITLE ☐ DELETE

**NAME
D
NYSTROM, PAUL H
STREET ADDRESS
1865 CINNAMON LANE
CITY-ST-ZIP
DUNEDIN FL**

TITLE ☐ DELETE

**NAME
D
AULETA, VINCENT S.
STREET ADDRESS
1881 DOUGLAS AVE.
CITY-ST-ZIP
DUNEDIN FL**

TITLE ☐ DELETE

**NAME
D
O'CONNEL
STREET ADDRESS
2456 BAYWOOD DR. W
CITY-ST-ZIP
DUNEDIN FL**

TITLE ☐ DELETE

**NAME
D
LONGEST, ELMER D.
STREET ADDRESS
1451 MAIN ST.
CITY-ST-ZIP
DUNEDIN FL**

TITLE ☐ DELETE

**NAME
D
TOSCANI, CAROL C.
STREET ADDRESS
2182 CHANTILLY LANE
CITY-ST-ZIP
DUNEDIN FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-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.

SIGNATURE:

Jay Walston
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAY WALSTON

21398

813-733-8372

Date Daytime Phone # 0070184

CR2E037 (10/97)