

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17311

FILED  
Feb 05, 2009  
Secretary of State

Entity Name: THE OPTIMIST CLUB OF PERRY, FLORIDA, INC.

**Current Principal Place of Business:**

C/O BILL L. FOWLER  
3562 GREEN FARM RD  
PERRY, FL 32347

**New Principal Place of Business:**

**Current Mailing Address:**

C/O BILL L. FOWLER  
3562 GREEN FARM RD  
PERRY, FL 32347

**New Mailing Address:**

BILL FOWLER  
3562 GREEN FARM RD.  
PERRY, FL 32347 US

FEI Number: 59-2715689

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

FOWLER, BILL  
3562 GREEN FARM RD  
PERRY, FL 32347 US

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

FOWLER, BILL  
3562 GREEN FARM RD  
PERRY, FL 32347 US

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: BILL FOWLER

02/05/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: KEELER, SCOTT C  
Address: 1808 CANOPY RD  
City-St-Zip: PERRY, FL 32347

Title: DST ( ) Delete  
Name: FOWLER, BILL,  
Address: 3562 GREEN FARM RD  
City-St-Zip: PERRY, FL 32347

Title: D ( ) Delete  
Name: EVERETT, DANNY  
Address: 103 DOGWOOD LANE  
City-St-Zip: PERRY, FL 32347

Title: D ( ) Delete  
Name: HOUCK, FEEBEE  
Address: 2600 LONNIE HOUCK  
City-St-Zip: PERRY, FL 32347

Title: P ( ) Delete  
Name: RILE, JOHN R JR  
Address: 5867 FREEMAN RD  
City-St-Zip: PERRY, FL 32348

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: ELLIS, JOE  
Address: 3480 OZALEA DR.  
City-St-Zip: PERRY, FL 32348

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

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

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

Title: D (X) Change ( ) Addition  
Name: RICE, RON  
Address: 5867 FREEMAN RD  
City-St-Zip: PERRY, FL 32348

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: BILL L. FOWLER

S/T

02/05/2009

Electronic Signature of Signing Officer or Director

Date