

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N29801** (0)
1. Corporation Name
CENTRAL PASCO OPTIMIST CLUB OF LAND O'LAKES, INC



Principal Place of Business
**18541 HWY 52
LAND O'LAKES FL 34639
US**

Mailing Address
**18451 HWY 52
LAND O'LAKES FL 34639
US**

3. Date Incorporated or Qualified
12/20/1988

3a. Date of Last Report
04/21/1995

2. Principal Place of Business
21

2a. Mailing Address
26

Suite, Apt. #, etc.
22

Suite, Apt. #, etc.
27

City & State
23

City & State
28

Zip
24

Country
25

Zip
29

Country
30

4. FEI Number
23-7383668

☒ 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**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WILLIAMS, VIRGIL
1008 HWY 52
LAND O'LAKES FL 34639**

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 *Virgil L. Williams*
Signature of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

June 6, 1996 DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE
D	SONS, WILLIAM E	18212 ST. RT. 52	LAND O'LAKES FL	<input type="checkbox"/>
VD	WILLIAM, S. VIRGIL	1008 HWY 52	LAND O'LAKES FL	<input type="checkbox"/>
D	RUMRILL, FRANK	1050 COUNTRY CLOSE DRIVE	LUTZ FL	<input type="checkbox"/>
STD	RUMRILL, FRANK	1050 COUNTRY CLOSE DR	LUTZ FL	<input type="checkbox"/>
VD	BRADLEY, RICHARD	18005 AKINS DRIVE	SPRINGHILL FL	<input checked="" type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
21 TITLE	22 NAME	23 STREET ADDRESS	24 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
61 TITLE	62 NAME	63 STREET ADDRESS	64 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

Virgil L. Williams

**DIRECTOR
GEORGE CHAPMAN
15918 COUNTRY FARM PL
TAMPA, FLA. 33624**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Virgil L. Williams*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-5-96 813 996 2168
Date Daytime Phone #

CR2E037 (12/95)