

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N36275

1. Entity Name

BEACH BAY OPTIMIST CLUB, INC.

Principal Place of Business

P O BOX 9715  
PANAMA CITY BEACH FL 32417-0115

Mailing Address

P O BOX 9715  
PANAMA CITY BEACH FL 32417-0115

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2979130

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HESS, GLENN L.  
9108 W HWY 98  
PANAMA CITY BEACH FL 32408

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.

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

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
P  
WOLFE, CAROLYN ☐ Delete  
6514 SOUTH LAGOON DRIVE  
PANAMA CITY FL 32408

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
P  
KATHERINE DYE ☒ Change ☐ Addition  
113 South SAN SORAI BLVD  
PANAMA CITY BEACH, FL 32413

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
ST  
PALKO, BARBARA ☐ Delete  
3874 QUAIL ST  
PANAMA CITY BEACH FL 32408

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
ST  
BARBARA FOSTER ☒ Change ☐ Addition  
16804 CASTLE AV  
PANAMA CITY BEACH, FL 32413

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VP  
WOLFE, GEORGIE ☐ Delete  
6514 SOUTH LAGOON DRIVE  
PANAMA CITY FL 32408

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VP  
JULIE HART ☒ Change ☐ Addition  
16404 E. LILLWATER DR  
PANAMA CITY BEACH, FL 32413

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VP  
FOSTER, JOHN ☐ Delete  
16804 CASTLE AVE  
PANAMA CITY FL 32413

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
V.P  
ART HOPKINS ☒ Change ☐ Addition  
121 ROSE CORAL DR  
PANAMA CITY BEACH, FL 32408

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
HART, JULIE ☐ Delete  
16404 EL LILLWATER DR  
PANAMA CITY BEACH FL 32413

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
BARBARA PALKO ☒ Change ☐ Addition  
3874 QUAIL ST  
PANAMA CITY BEACH, FL 32408

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
MCGRUDER, WINNIE ☐ Delete  
121 ROSE CORAL DRIVE  
PANAMA CITY BCH FL 32413

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
JOAN REIDY ☒ Change ☐ Addition  
130 RUSTY GANS  
PANAMA CITY BEACH, FL 32413

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)