

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38225

FILED
Aug 03, 2004
Secretary of State**Entity Name:** OPTIMIST CLUB OF BONITA SPRINGS, INC.**Current Principal Place of Business:**27233 JOLLY ROGER LN.
BONITA SPRINGS, FL 33923 US**New Principal Place of Business:**11811 IMPERIAL PINES WAY
BONITA SPRINGS, FL 34135 US**Current Mailing Address:**27233 JOLLY ROGER LN.
BONITA SPRINGS, FL 33923 US**New Mailing Address:**11811 IMPERIAL PINES WAY
BONITA SPRINGS, FL 34135 US**FEI Number:** 65-0182128**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**NORRIS JOYCE S
27233 JOLLY ROGER LN
BONITA SPRINGS, FL 34213 US**Name and Address of New Registered Agent:**CORBIN, STEVE M
11811 IMPERIAL PINES WAY
BONITA SPRINGS, FL 34135 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: STEVE CORBIN

08/03/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SCHMITT, DAVID
Address: 11031 ORANGEWOOD DRIVE
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D () Delete
Name: JOYCE S NORRIS,
Address: 27233 JOLLY ROGER LN
City-St-Zip: BONITA SPRINGS, FL 34135

Title: STD () Delete
Name: CORBIN, STEVE
Address: 11811 IMPERIAL PINES WAY
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D () Delete
Name: SHIELDS, FRANK
Address: 27431 POLLARD DRIVE
City-St-Zip: BONITA SPRINGS, FL 33923

Title: D () Delete
Name: SHIELDS, BERNICE
Address: 27431 POLLARD DRIVE
City-St-Zip: BONITA SPRINGS, FL 33923

Title: D () Delete
Name: JOE WESLEY NORRIS,
Address: 27233 JOLLY ROGER LN
City-St-Zip: BONITA SPRINGS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CORBIN, STEPHANIE
Address: 11811 IMPERIAL PINES WAY
City-St-Zip: BONITA SPRINGS, FL 34135

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: STEVE CORBIN

STD

08/03/2004

Electronic Signature of Signing Officer or Director

Date