## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Jan 20, 2004 8:00 am Secretary of State

| DOCUMENT # N38369  1. Entity Name THE PALM HARBOR OPTIMIST CLUB, INC.  |  |  |                       |  |  |   |   |                            | 01-20-20        | 04 900           | 041 015     | 5 ****61.2   | !5   |
|--|--|--|-----------------------|--|--|---|---|----------------------------|-----------------|------------------|-------------|--|--|
| Principal Place of Business<br>1021 15TH STREET<br>PALM HARBOR, FL 34683   |  |  | 1021 1                | Mailing Address<br>1021 15TH STREET<br>PALM HARBOR, FL 34683 |  |   |   |                            |                 |                  | •           |  |  |
| 2. Principal Pl  | lace of Busine   | ess  | 3. Mailin             | g Address  | <u>-</u>   | ·<br>   | }   |                            |                 |                  |             |  |  |
| Suite, Apt. #, etc.  |  |  | Suite, Apt. #, etc.   |  |  |   |   | 01162004                   | Chq-NP          |                  | CB2F0       | 37 (10/03)   |  |
| City & State   |  |  | City & State          |  |  | <del></del>   |   | 4. FEI Numb<br>59-311      |                 |                  |             | Ac   | oplied For                                       |
| Zip Country -  |  |  | Zip Cou               |  |  | untry   | 59-3112/53   Not Applica  5. Certificate of Status Desired   \$8.75 Additional Fee Required |                            |                 |                  |             | fitional   |  |
| }  | 6 Name   | and Address of Current   | Registered            | Agent  |  | <del></del>   | لـــــــــــــــــــــــــــــــــــــ  | 7 Name and                 | d Address of    | New Re           | distand     |  | <u></u>  |
|  | O. Maide   | and Address of Current   | negistereu            | Agent  |  | Name  |   | 7. Maile ain               | a Addiess of    |                  | giatorou    | Agein  |  |
| FIELDS, CONNIE<br>1021 15TH ST   |  |  |                       | <u></u>  |  |   | dress (F  | O. Box Numb                | per is Not Acc  | eptable)         | <del></del> |  |  |
| PALM HAF   | RBOR, FL   | 34683  |                       |  |  | ļ   |   | <del></del> ,              | <del></del>     |                  | <del></del> |  |  |
|  |  |  |                       |  |  |   | FL Zip Code   |                            |                 |                  |             |  |  |
|  | named entity<br>lions of registe   | v submits this statement fi<br>ered agent.   | or the purpos         | e of changing its  | s register   | ed office or r  | registere   | ed agent, or bo            | oth, in the Sta | te of Floi       | rida.lam    | ı familiar with,   | and accept                                       |
| SIGNATURE.   | Signature, typed   | or printed.zimme of registered agen  | t and title if applic | able. (NO1   | TE: Registere  | d Agent signature   | e required  | when reinstating)          |                 |                  | DATE        |  |  |
| Filing Fee is \$61.25<br>Due by May 1, 2004  |  |  |                       |  |  |   |   |                            |                 |                  |             |  |  |
|  |  |  |                       | 9. Election Ca<br>Trust Fund                                 |  |   |   | \$5.00 May<br>Added to Fee | Be s            |                  |             | ck payable to  |  |
| 10.  |  |  | IRECTORS              |  |  | ion.  | _J<br>  | \$5.00 May<br>Added to Fee | s               | Flori            | da Depa     | irtment of S   | tate ""  |
| TITLE<br>NAME  | VD<br>MEYER, D   | OFFICERS AND D   | IRECTORS              |  | Contribut<br>11.<br>Tirl   | E   | _J<br>  | Added to Fee               | s               | Flori            | da Depa     | irtment of S   | tate ""  |
| TITLE NAME STREET ADDRESS CITY-ST_ZIP  | VD MEYER, D  | OFFICERS AND D   | IRECTORS              | Trust Fund   | 11. TITL NAM   | tion. [   | _J<br>  | Added to Fee               | s               | Flori            | da Depa     | DIRECTORS IN Change  | tate   |
| TITLE NAME STREET ADDRESS  | VD MEYER, E 760 SOUN PALM HAI PD FIELDS, C 1021 15TE   | OFFICERS AND DONNA NOVIEW DRIVE RBOR, FL 34683 CONNIE  | IRECTORS              | Trust Fund   | 11. TITL NAM STRI CITY TITL NAW STRI   | E E E E ADDRESS (-ST-ZIP  | _J<br>  | Added to Fee               | s               | Flori            | da Depa     | DIRECTORS IN Change  | tate   |
| TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE **  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME   | VD MEYER, E 760 SOUN PALM HAI PD FIELDS, C 1021 15TE PALM HAI VSTD ERICKSO                   | OFFICERS AND D OONNA NDVIEW DRIVE RBOR, FL 34683 CONNIE H AVE. RBOR, FL 34683 IN, GLENN W          | RECTORS               | Trust Fund   | Contribut  11. TITL NAM STRI CITY TITL NAM STRI CITY TITL NAM  | E EE ADDRESS (-ST-ZIP E EET ADDRESS (-ST-ZIP E EET ADDRESS (-ST-ZIP E EET ADDRESS (-ST-ZIP E E E E E E E E E E E E E E E E E E E  | _J<br>  | Added to Fee               | s               | Flori            | da Depa     | IRECTORS IN Change   | 1 10 Addition                                    |
| TITLE  NAME  STREET ADDRESS  CITY-ST, ZIP  TITLE 0, 2  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  | VD MEYER, E 760 SOUN PALM HAI PD FIELDS, C 1021 15TH PALM HAI VSTD ERICKSO 305 LENN          | OFFICERS AND D OONNA NDVIEW DRIVE RBOR, FL 34683 CONNIE H AVE. RBOR, FL 34683 IN, GLENN W          | IRECTORS              | Trust Fund  Delete   | Contribut  11. TILL NAM STRII CITY TITL NAM STRII CITY TITL NAM STRII ST | E EET ADDRESS (-ST-ZIP E EET ADDRESSST-ZIP E  | _J<br>  | Added to Fee               | s               | Flori            | da Depa     | intment of Stormer Change  | N 10 Addition Addition                           |
| TITLE  NAME  STREET ADDRESS  CITY-ST, ZIP  TITLE **  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  STREET ADDRESS  | VD MEYER, E 760 SOUN PALM HAI PD FIELDS, C 1021 15TH PALM HAI VSTD ERICKSO 305 LENN          | OFFICERS AND D OONNA NDVIEW DRIVE RBOR, FL 34683 CONNIE H AVE. RBOR, FL 34683 IN, GLENN W HOX RD W | IRECTORS              | Trust Fund  Delete   | Contribut  11.  TITL  NAM  STRI  CITY  TITL  NAM  STRI  ST | E EET ADDRESS (-ST-ZIP E E E E E E E E E E E E E E E E E E E  |   | Added to Fee:              | S HANGES TO     | Flori            | da Depá     | intment of Storement of Storeme | N 10 Addition Addition                           |
| TITLE  NAME  STREET ADDRESS  CITY-ST, ZIP  TITLE **  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  STREET ADDRESS  | VD MEYER, E 760 SOUN PALM HAI PD FIELDS, C 1021 15TH PALM HAI VSTD ERICKSO 305 LENN          | OFFICERS AND D OONNA NDVIEW DRIVE RBOR, FL 34683 CONNIE H AVE. RBOR, FL 34683 IN, GLENN W HOX RD W | IRECTORS              | Trust Fund  Delete  Delete                                   | CONTRIBUTE  11. TITLE NAM STRICT  TITLE NAM STRI | E EET ADDRESS  ST-ZIP  E HE HE EET ADDRESS  ST-ZIP  E HE  |   | Added to Fee               | S HANGES TO     | Flori            | da Depá     | intment of Storement of Storeme | 1 10 Addition Addition Addition                  |
| TITLE NAME STREET ADDRESS GITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS  | VD MEYER, E 760 SOUN PALM HAI PD FIELDS, C 1021 15TH PALM HAI VSTD ERICKSO 305 LENN          | OFFICERS AND D OONNA NDVIEW DRIVE RBOR, FL 34683 CONNIE H AVE. RBOR, FL 34683 IN, GLENN W HOX RD W | IRECTORS              | Trust Fund  Delete  Delete                                   | CONTRIBUTE  11. TITLE NAM STRING CITY TITLE NAM STRING  | E EET ADDRESS  /-ST-ZIP  E ME EET ADDRESS  /-ST-ZIP  E  |   | Added to Fee:              | S HANGES TO     | Flori            | da Depá     | intment of S DIRECTORS IN Change Change Change Change Change   | Addition  Addition  Addition  Addition  Addition |
| TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP | VD MEYER, E 760 SOUN PALM HAI PD FIELDS, C 1021 15TH PALM HAI VSTD ERICKSO 305 LENN PALM HAI | OFFICERS AND D OONNA NDVIEW DRIVE RBOR, FL 34683 CONNIE H AVE. RBOR, FL 34683 IN, GLENN W HOX RD W | 2.7 -                 | Trust Fund  Delete  Delete  Delete  Delete                   | CONTRIBUTE  11. TITLE NAM STRING CITY TITLE  | E EET ADDRESS (-ST-ZIP E AE EET ADDRESS (-ST-ZIP E AE EET ADDRESS (-ST-ZIP E AE EET ADDRESS (-ST-ZIP E E EET ADDRESS (-ST-ZIP E E E E E E E E E E E E E E E E E E E | D<br>Join<br>Pail   | Added to Fee               | HANGES TO       | Flori<br>OFFICER | da Depá     | intrment of S  DIRECTORS IN  Change  Change  Change  | Addition  Addition  Addition  Addition  Addition |

Thereby certify that the information supplied with this limit does not quality for the exemption stated in Section 79.07(5)(i), notice stated in the certify that it is 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 ON PRINTED NAME OF SIGNING OFFICER ON DIRECTOR

1-16-04 727-785-037