

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N41712

**FILED**  
**Apr 05, 2010**  
**Secretary of State**

**Entity Name:** THE LIBERTY CITY OPTIMIST CLUB OF FLORIDA, INC.

**Current Principal Place of Business:**

1350 NW 50 ST  
MIAMI, FL 33142 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 510354  
MIAMI, FL 33151 US

**New Mailing Address:**

**FEI Number:** 65-0229340

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

JOHNSON, SAMUEL K  
1350 NW 50 ST  
MIAMI, FL 33142 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: ED  
Name: JOHNSON, SAMUEL K  
Address: 6400 MAIN ST, # 4-202  
City-St-Zip: MIAMI LAKES, FL 33014

Title: D  
Name: CAMPBELL, LUTHER  
Address: 7180 N. OAKMOUNT  
City-St-Zip: MIAMI LAKES, FL 33014

Title: VPD  
Name: BENEBY, GLEN-ROY  
Address: 675 NW 56TH ST #509  
City-St-Zip: MIAMI, FL 33127

Title: PD  
Name: DARLING, GERALD  
Address: 16803 S.W. 107TH PLACE  
City-St-Zip: MIAMI, FL 33157

Title: STD  
Name: TAYLOR, CORALEE  
Address: 14001 NE 1ST AVE  
City-St-Zip: N. MIAMI, FL 33161

Title: D  
Name: PRESLEY, SHIRLEY  
Address: 14640 PIERCE STREET  
City-St-Zip: MIAMI, FL 33176

I hereby 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 all other like empowered.

SIGNATURE: SAMUEL K. JOHNSON

ED

04/05/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date