

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N46932

(2)

1. Corporation Name

OPTIMIST CLUB OF WEST PALM BEACH, INC.



Principal Place of Business

POB 2243
W PALM BEACH FL 33402-2243

Mailing Address

POB 2243
W PALM BEACH FL 33402-2243

3. Date Incorporated or Qualified
01/21/1992

3a. Date of Last Report
07/10/1995

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

4. FEI Number
59-6139128

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

TOMLINSON, ALLEN R.
505 S FLAGLER DR
STE 1100
W PALM BEACH FL 33402

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

Signature typed or printed name of registered agent and date of appointment

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME THOMAS, DAVID J
STREET ADDRESS 222 RIDGEVIEW DR
CITY-ST-ZIP PALM BEACH FL

DELETE

TITLE VD
NAME CONNEALY, PAUL J
STREET ADDRESS 832 WINDERMERE WAY
CITY-ST-ZIP PALM BEACH GARDENS FL

DELETE

TITLE VD
NAME HOCHSTETLER, NANCY G
STREET ADDRESS 301 LAKE SHORE DR #710
CITY-ST-ZIP LAKE PARK FL

DELETE

TITLE STD
NAME HOWARD-SMITH, JOHN G
STREET ADDRESS 350 VALLEY FORGE RD
CITY-ST-ZIP WEST PALM BEACH FL 43

DELETE

TITLE ASD
NAME HOCHSTETLER, NANCY G
STREET ADDRESS 301 LAKE SHORE DR., #710
CITY-ST-ZIP LAKE PARK FL

DELETE

TITLE D
NAME HOBBS, THOMAS E
STREET ADDRESS 432 FONTANA DR
CITY-ST-ZIP PALM SPRINGS FL

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE DIR Change Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

600001888956

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21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

PRES, DIR

VICE PRES, DIR

TREAS, DIR

SIGNATURE:

THOMAS E. HOBBS TREAS.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/96 407-585-7300

Date

Daytime Phone #

CR2E037 (12/95)