

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 09, 2002 8:00 am**  
**Secretary of State**

02-05-2002 90081 040 \*\*\*\*61.25

**DOCUMENT # N93000000407**

1. Entity Name

**THE-OPTIMIST CLUB OF BOYNTON BEACH, INC.**

Principal Place of Business

Mailing Address

372 N. CONGRESS AVE.  
 BOYNTON BEACH FL 33426  
 US

372 N. CONGRESS AVE.  
 BOYNTON BEACH FL 33426  
 US

2. Principal Place of Business

3615 Boynton Bch. Blvd.

3. Mailing Address

1226 Palama Way

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Boynton Beach, FL

City & State

Lantana, FL

Zip

33436

Country

U.S.A.

Zip

33462

Country

U.S.A.

4. FEI Number

65-0406013

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RICHARDS, MARGE  
 1226 PALAMA WAY  
 LANTANA FL 33462

7. Name and Address of New Registered Agent

Name James DeLand  
 Street Address (P.O. Box Number is Not Acceptable) 445 Forest Hill Blvd.  
 City West Palm Beach FL Zip Code 33405

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 re-stating)

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

|                |                           |                                            |
|----------------|---------------------------|--------------------------------------------|
| TITLE          | P                         | <input type="checkbox"/> Delete            |
| NAME           | RICHARDS, MARGE           |                                            |
| STREET ADDRESS | 1226 PALAMA WAY           |                                            |
| CITY-ST-ZIP    | LANTANA FL 33462          |                                            |
| TITLE          | D                         | <input type="checkbox"/> Delete            |
| NAME           | KING, MICHELLE            |                                            |
| STREET ADDRESS | 9871 INDIAN RIVER RUN     |                                            |
| CITY-ST-ZIP    | BOYNTON BEACH FL 33437    |                                            |
| TITLE          | D                         | <input checked="" type="checkbox"/> Delete |
| NAME           | BALDO, BOB                |                                            |
| STREET ADDRESS | 7528 BRIARCLIFF CIRCLE    |                                            |
| CITY-ST-ZIP    | LAKE WORTH FL 33467       |                                            |
| TITLE          | D                         | <input type="checkbox"/> Delete            |
| NAME           | DELAND, JAMES             |                                            |
| STREET ADDRESS | 2840 WAYNE ROAD           |                                            |
| CITY-ST-ZIP    | WEST PALM BEACH FL        |                                            |
| TITLE          | VP                        | <input type="checkbox"/> Delete            |
| NAME           | Richard Tickner           |                                            |
| STREET ADDRESS | 2408 Ave. Madrid oste     |                                            |
| CITY-ST-ZIP    | West Palm Beach, FL 33415 |                                            |
| TITLE          |                           | <input type="checkbox"/> Delete            |
| NAME           |                           |                                            |
| STREET ADDRESS |                           |                                            |
| CITY-ST-ZIP    |                           |                                            |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

|                |                               |                                                                              |
|----------------|-------------------------------|------------------------------------------------------------------------------|
| TITLE          | D                             | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | Raymond Mongoli               |                                                                              |
| STREET ADDRESS | 2745 Worcester Rd             |                                                                              |
| CITY-ST-ZIP    | Lantana, FL 33462             |                                                                              |
| TITLE          | D                             | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | MARIAN MIRANDI                |                                                                              |
| STREET ADDRESS | 318 KNOTTY PINE CIRCLE #B-1   |                                                                              |
| CITY-ST-ZIP    | GREENACRES CITY, FL 33463     |                                                                              |
| TITLE          | Sec/Treasurer                 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | Nerissa Carter                |                                                                              |
| STREET ADDRESS | 2799 Kentucky St.             |                                                                              |
| CITY-ST-ZIP    | West Palm Beach, FL 33406     |                                                                              |
| TITLE          | D                             | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | JEAN Faga                     |                                                                              |
| STREET ADDRESS | 1208 Old Boynton Rd.          |                                                                              |
| CITY-ST-ZIP    | Boynton Bch., FL 33426        |                                                                              |
| TITLE          | D                             | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | John Perrotti                 |                                                                              |
| STREET ADDRESS | 4706 Lucerne Lakes Blvd. #103 |                                                                              |
| CITY-ST-ZIP    | Lake Worth, FL 33467          |                                                                              |
| TITLE          | D                             | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | Patricia Mongoli              |                                                                              |
| STREET ADDRESS | 6358 South Ash Ln.            |                                                                              |
| CITY-ST-ZIP    | Lantana, FL 33462             |                                                                              |

12. I hereby certify that the information supplied with this filing does not qualify 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 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 information.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

MARGE F. RICHARDS

1/15/02 (561) 588-2488

CR2E037 (9/01)