## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N9400003786

FILED Apr 02, 2008 Secretary of State

Entity Name: OVERTOWN COMMUNITY OPTIMIST CLUB, INC.

**Current Principal Place of Business: New Principal Place of Business:** 401 N.W. 12 STREET GIBSON PARK MIAMI, FL 33136 **Current Mailing Address: New Mailing Address:** 16464 S.W. 32 STREET MIRAMAR, FL 33027 US FEI Number: 31-1613923 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WASHINGTON, EMANUEL SR. 16464 S.W. 32 STREET MIRAMAR, FL 33027 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete MINTER, MICHAEL PRES WILLIAMS, WILLIE PRES Name: Name: 17620 N.W. 8 AVENUE Address: 401 N.W 12 STREET Address: City-St-Zip: MIAMI, FL 33169 US City-St-Zip: MIAMI, FL 33136 US Title: ( ) Delete Title: (X) Change ( ) Addition WASHINGTON, EMANUEL TREAS Name: WASHINGTON, EMANUEL DIRECTO Name: Address: 16464 S.W. 32ND STREET Address: 16464 S.W. 32ND STREET City-St-Zip: MIRAMAR, FL 33027 US City-St-Zip: MIRAMAR, FL 33027 US Title: () Delete Title: (X) Change ( ) Addition CRUMP, RICHARD VICE PR Name: CRUMP, RICHARD VICE PR Name: 7500 N.W. 11 AVENUE 155 N.W.10 STREET APT.. # 2 Address: Address: City-St-Zip: MIAMI, FL 33150 US City-St-Zip: MIAMI, FL 33136 US Title: ( ) Delete Title: (X) Change ( ) Addition RUDOLPH, DERRICK VICE PR Name: Name: RUDOLPH, DERRICK D 222 N.W. 22 STREET 222 N.W. 22 STREET Address: Address: City-St-Zip: MIAMI, FL 33127 US City-St-Zip: MIAMI, FL 33127 US Title: () Delete Title: () Change () Addition ROLLE, LAKESHA DIRECTO Name: Name: 469 N.W. 19 STREET Address: Address: City-St-Zip: MIAMI, FL 33136 US City-St-Zip: Title: () Delete Title: () Change () Addition HANKS, BENJAMIN DIRECTO Name: Name: Address: 320 N.W.20 STREET Address: MIAMI, FL 33127 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: EMANUEL WASHINGTON D 04/02/2008