

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000004393

1. Entity Name

THE OPTIMIST CLUB OF YULEE, INC.

FILED
Apr 16, 2002 8:00 am
Secretary of State

04-16-2002 90157 048 ****61.25

0057702

Principal Place of Business 3134 E. STATE ROAD 200 YULEE FL 32097	Mailing Address P.O. BOX 1077 YULEE FL 32041
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address P.O. BOX 15664 Suite, Apt. #, etc.
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City & State YULEE, FL	City & State FERNANDINA BEACH, FL
Zip 32097	Zip 32035
Country FLORIDA	Country NASSAU

4. FEI Number 36-4035975	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent BRAUDA, TONY 227 BLACKROCK ROAD YULEE FL 32097

7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 	(NOTE: Registered Agent signature required when reinstating)	DATE 3-11-02
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FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS	
TITLE D NAME DRURY, PATSY STREET ADDRESS 1981 ALGER RD CITY-ST-ZIP YULEE FL 32097	<input type="checkbox"/> Delete
TITLE D NAME CLARK, BETH STREET ADDRESS 76 WOODSTOCK PLACE CITY-ST-ZIP FERNANDINA BCH. FL 32034	<input type="checkbox"/> Delete
TITLE D NAME PIPER, LAWRENCE STREET ADDRESS 570 PEEPLES RD CITY-ST-ZIP YULEE FL 32097	<input type="checkbox"/> Delete
TITLE VPD NAME TURNER, JUDY STREET ADDRESS 3124 STATE RD 200 CITY-ST-ZIP FERNANDINA BEACH FL 32034	<input type="checkbox"/> Delete
TITLE PD NAME NOBLE, RON STREET ADDRESS 1305 ATLANTIC AVENUE CITY-ST-ZIP FERNANDINA BEACH FL 32034	<input type="checkbox"/> Delete
TITLE STD NAME BRAUDA, TONY STREET ADDRESS 227 BLACKROCK ROAD CITY-ST-ZIP YULEE FL 32097	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE STD NAME DRURY, PATSY STREET ADDRESS 1981 ALGER RD CITY-ST-ZIP YULEE, FL 32097	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VD NAME TURNER, JUDY STREET ADDRESS 1248 BLACKMAN RD CITY-ST-ZIP YULEE, FL 32097	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D NAME NOBLE, RON STREET ADDRESS 1305 ATLANTIC AVE CITY-ST-ZIP FERNANDINA BEACH, FL 32034	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE PD NAME BRAUDA, TONY STREET ADDRESS 227 BLACKROCK RD CITY-ST-ZIP YULEE, FL 32097	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 empowered.

SIGNATURE 	SIGNATURE REQUIRED	DATE 3-11-02	DAYTIME PHONE # 904-491-2555
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CR2E037 (9/01)