

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004393

FILED
Apr 29, 2009
Secretary of State

Entity Name: THE OPTIMIST CLUB OF YULEE, INC.

Current Principal Place of Business:

JD'S CHOPHOUSE
96098 LOFTON SQ
YULEE, FL 32097

New Principal Place of Business:

85736 AVANT RD
YULEE, FL 32097

Current Mailing Address:

PO BOX 15664
FERNANDINA BEACH, FL 32035

New Mailing Address:

85736 AVANT RD
YULEE, FL 32097

FEI Number: 36-4035975

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCBETH, TINA
85435 RADIO AVE
YULEE, FL 32097 US

Name and Address of New Registered Agent:

WILLIAMS, KATHY
85736 AVANT RD
YULEE, FL 32097 US

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: KATHY WILLIAMS

04/29/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: MCBETH, TINA M
Address: 85485 RADIO AVE
City-St-Zip: YULEE, FL 32097

Title: VP () Delete
Name: PIPER, LAWRENCE
Address: 570 PEEPLES RD
City-St-Zip: YULEE, FL 32097

Title: D () Delete
Name: NOBLE, RON
Address: 1305 ATLANTIC AVENUE
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: S (X) Delete
Name: MURRY, SUSAN
Address: 85798 BLACKMON RD.
City-St-Zip: YULEE, FL 32097

Title: P (X) Delete
Name: WILLIAMS, KATHY
Address: 96014 CHESTER ROAD
City-St-Zip: YULEE, FL 32097

Title: D (X) Delete
Name: CLAUDIA, WILLETTE
Address: 2137 WHITFIELD DR.
City-St-Zip: FERNANDINA BEACH, FL 32034

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SEC/ (X) Change () Addition
Name: WILLIAMS, KATHY
Address: 85736 AVANT RD
City-St-Zip: YULEE, FL 32097

Title: PRES (X) Change () Addition
Name: PIPER, LAWRENCE
Address: 86408 PEEPLES RD
City-St-Zip: YULEE, FL 32097

Title: V/P (X) Change () Addition
Name: WILLETTE, CLAUDIA
Address: 2137 WHITFIELD DR
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: KATHY WILLIAMS

SEC

04/29/2009

Electronic Signature of Signing Officer or Director

Date