## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N95000005677

FILED Feb 24, 2011 Secretary of State

Entity Name: OPTIMIST INTERNATIONAL YOUTH PROGRAMS FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

4494 LINDELL BLVD. ST. LOUIS, MO 63108

Current Mailing Address: New Mailing Address:

4494 LINDELL BLVD. ST. LOUIS, MO 63108

FEI Number: 43-1733736 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NRAI SERVICES, INC. 515 E. PARK AVENUE TALLAHASSEE, FL 32301 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:

Electronic Signature of Registered Agent Date

**OFFICERS AND DIRECTORS:** 

Title: DV

 Name:
 GARNER, KEN

 Address:
 1950 ROCKBROOK CT.

 City-St-Zip:
 FT. WORTH, TX 76112 US

Title: DV

Name: CRESWELL, JACK
Address: 30 HARTMAN ROAD
City-St-Zip: READING, PA 19606 US

Title: DV

Name: SHRIVER, MARK O Address: 301 CREEKSTONE

City-St-Zip: WOODSTOCK, GA 30188 US

Title: DV

Name: RODGERS, DANNY Address: 3521 MINOT AVE.

City-St-Zip: FORT WORTH, TX 76133 US

Title: DV

Name: KONDRASUK, JAMES Address: 4930 ARROWHEAD DR City-St-Zip: MONONA, WI 53716 US

Title: DST

 Name:
 ELLERBE, BENNY

 Address:
 4494 LINDELL BLVD

 City-St-Zip:
 ST. LOUIS, MO 63108 US

I hereby 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 all other like empowered.

SIGNATURE: CONSTANCE J. PELLOCK CFO 02/24/2011