

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N96000004969 (9)

1. Corporation Name

THE OPTIMIST CLUB OF JACOB, INC. ~~FIN 36-4022586~~

Principal Place of Business

Mailing Address

4522 JACKSON ROAD
COTTONDALE FL 32432

Sylvia Forward

4522 JACKSON ROAD
COTTONDALE FL 32431-6536

2173 Wesley Rd.
Cottondale, FL.

GN - 36-4022-586

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97 SEP 30 PM 12:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business

21 2173 Wesley Rd.

22 Cottondale, FL.

23 32431 Jackson

24 Zip Country

2a. Mailing Address

26 2173 Wesley Rd.

27 Cottondale, FL.

28 32431 Jackson

29 Zip Country

3. Date Incorporated or Qualified
09/25/1996

3a. Date of Last Report

1997

4. FEI Number ~~FIN 36-4022586~~
N96000004969 (9)

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BEECHAM, CORA
4522 JACKSON ROAD
COTTONDALE FL 32432

Sylvia Forward
President
of Jacob Optimist
Club

81 Name Sylvia J. Forward
82 Street Address (P.O. Box Number is Not Acceptable)
2173 Wesley Rd.
83 Cottondale
84 City

FL 85 Zip Code
32431

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Sylvia J. Forward - President

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME FORWARD, SYLVIA
STREET ADDRESS 2173 WESLEY RD.
CITY-ST-ZIP COTTONDALE FL

TITLE D
NAME WHITE, CAROL
STREET ADDRESS 4453 JACKSON RD
CITY-ST-ZIP COTTONDALE FL

TITLE D
NAME WRIGHT, GWENDOLYN
STREET ADDRESS 2183 JACOB MAIN ST.
CITY-ST-ZIP COTTONDALE FL

TITLE D
NAME CLEMONS, ANNIE
STREET ADDRESS P.O. BOX 223
CITY-ST-ZIP COTTONDALE FL

TITLE D
NAME JOHNSON, EULA
STREET ADDRESS 4453 JACKSON RD.
CITY-ST-ZIP COTTONDALE FL

TITLE D
NAME PITTMAN, LINNIE M
STREET ADDRESS 4532 JACKSON RD.
CITY-ST-ZIP COTTONDALE FL

1.1 TITLE President
1.2 NAME Forward, Sylvia
1.3 STREET ADDRESS 2173 Wesley Rd.
1.4 CITY-ST-ZIP Cottondale, FL 32431

2.1 TITLE Board Member
2.2 NAME Daniels, Helen
2.3 STREET ADDRESS 506 East Church Ave.
2.4 CITY-ST-ZIP Chipley, FL 32428

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE 2nd Vice President
4.2 NAME Lewis, Josephine
4.3 STREET ADDRESS 2236 Bethune Ct.
4.4 CITY-ST-ZIP Cottondale, FL 32431

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

92E037 (9/96)