

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000003712

1. Entity Name

BAYFRONT OPTIMIST CLUB, INC.

**FILED**  
**Mar 01, 2000 8:00 am**  
**Secretary of State**

03-01-2000 90058 028 \*\*\*\*61.25

Principal Place of Business

Mailing Address

T. GARDNER BAYLESS III  
181-78TH AVE. NO.  
ST. PETERSBURG FL 33702

T. GARDNER BAYLESS III  
181-78TH AVE. NO.  
ST. PETERSBURG FL 33702-4461



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Bay front Optimist club  
Suite, Apt. #, etc.

Bay front Optimist Club  
Suite, Apt. #, etc.

PO Box 13022  
City & State

PO Box 13022  
City & State

St Petersburg, FL  
Zip

St Petersburg, FL  
Zip

33733  
Country

33733  
Country

Pinellas

Pinellas

4. FEI Number

36-4120140

Applied For  
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HOWARD, BETH  
7300 SUNSHINE SKWAY LN #101  
ST. PETERSBURG FL 33711

Name

LINDA PAUKSTYS

Street Address (P.O. Box Number is Not Acceptable)

6400 15 Street N

City

St Petersburg

FL

Zip Code

33702

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:  
FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution.

☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
STD  
PAULSTYS, LINDA  
6400 15 ST N  
ST. PETERSBURG FL 33702

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PAUKSTYS, LINDA  
☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
HOWARD, BETH  
7300 SUNSHINE SKYWAY LANE #101  
ST. PETERSBURG FL 33711

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
Rettig, James Jr  
4224 Corona St  
Tampa, FL 33629  
☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VPD  
HANSON, DOUGLAS  
918 59TH AVE  
ST. PETERSBURG BEACH FL 33706

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VPD  
Jose Ramirez, Josie  
5500 9 Street S  
St Petersburg FL 33705  
☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
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STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
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CITY-ST-ZIP  
☐ Delete

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CITY-ST-ZIP  
☐ Change ☐ 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 PAUKSTYS

2/23/00

(727) 526-7932

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)