2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005283

Entity Name: OVIEDO OPTIMIST CLUB, INC.

FILED Apr 22, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
	NBROOK WA' 'ARK, FL 327					
Current Mailing Address:				New Mailing Address:		
	NBROOK WAY PARK, FL 327					
FEI Number:	59-3507596	FEI Number Applied For()	FEI Number Not A	pplicable ()	Certificate of Status De	esired()
Name and	Address of 0	Current Registered Agent:	Name a	nd Address of I	New Registered Age	nt:
COOPER, 1020 WELI OVIEDO, F	LINGTON CT	JS				
The above in the State		submits this statement for the p	urpose of changin	g its registered o	office or registered ag	ent, or both,
SIGNATUR	RE:					
	Electro	nic Signature of Registered Age	ent		Date	
OFFICERS AND DIRECTORS:			ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	DP (PUDLES, DAVI 7741 FERNBR WINTER PARK	OOK WAY	Title: Name: Address: City-St-Zi) Change ()Addition	
Title: Name: Address: City-St-Zip:	DV (PUDLES, SHAI 7741 FERNBR WINTER PARK	OOK WAY	Title: Name: Address: City-St-Zi _l	PUDLES, SHA 7741 FERNBR	ROOK WAY	
Title: Name: Address: City-St-Zip:	D (BURNS, PAUL 1079 DEES DE OVIEDO, FL 3	RIVE	Title: Name: Address: City-St-Zi _l) Change () Addition	
Title: Name: Address: City-St-Zip:	D (BEAULIEU, MA 300 ALEXAND OVIEDO, FL 3	RIA BLVD	Title: Name: Address: City-St-Zi _l	BEAULIEU, MA 300 ALEXAND	ORIA BLVD	
Title: Name: Address: City-St-Zip:	DV (RISING, MARG 407 SEYMOUR OVIEDO, FL 3	RE CT	Title: Name: Address: City-St-Zi _l) Change ()Addition	
Title: Name: Address: City-St-Zip:	DST (COOPER, DAV 1020 WELLING OVIEDO, FL 3	STON CT	Title: Name: Address: City-St-Zi _l) Change ()Addition	

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: DAVID COOPER DST 04/22/2008