

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005283

FILED
Mar 30, 2009
Secretary of State

Entity Name: OVIEDO OPTIMIST CLUB, INC.

Current Principal Place of Business:

7741 FERNBROOK WAY
WINTER PARK, FL 32792

New Principal Place of Business:

Current Mailing Address:

7741 FERNBROOK WAY
WINTER PARK, FL 32792

New Mailing Address:

FEI Number: 59-3507596

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COOPER, DAVID J
1020 WELLINGTON CT
OVIEDO, FL 32765 US

Name and Address of New Registered Agent:

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: DP () Delete
Name: PUDLES, DAVID
Address: 7741 FERNBROOK WAY
City-St-Zip: WINTER PARK, FL 32792

Title: D () Delete
Name: PUDLES, SHARI
Address: 7741 FERNBROOK WAY
City-St-Zip: WINTER PARK, FL 32792

Title: D () Delete
Name: BURNS, PAUL R (RICK)
Address: 1079 DEES DRIVE
City-St-Zip: OVIEDO, FL 32765

Title: DV () Delete
Name: BEAULIEU, MARC
Address: 300 ALEXANDRIA BLVD
City-St-Zip: OVIEDO, FL 32765

Title: DV () Delete
Name: RISING, MARGIE
Address: 407 SEYMOUR CT
City-St-Zip: OVIEDO, FL 32765

Title: DST () Delete
Name: COOPER, DAVID
Address: 1020 WELLINGTON CT
City-St-Zip: OVIEDO, FL 32765

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: PUDLES, SHARI
Address: 7741 FERNBROOK WAY
City-St-Zip: WINTER PARK, FL 32792

Title: D (X) Change () Addition
Name: PUDLES, DAVID
Address: 7741 FERNBROOK WAY
City-St-Zip: WINTER PARK, FL 32792

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

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: DAVID COOPER

DST

03/30/2009

Electronic Signature of Signing Officer or Director

Date