## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED DOCUMENT # N9800005399 May 03, 2000 8:00 am Secretary of State LAKEVIEW OPTIMIST CLUB OF ST. PETERSBURG, FL. IN 05-03-2000 90017 022 \*\*\*\*61.25 Principal Place of Business Mailing Address C/O DOROTHY PATTERSON C/O DOROTHY PATTERSON 847 HILLSIDE CT. S. 847 HILLSIDE CT. S. ST. PETERSBURG FL 33705-5233 ST. PETERSBURG FL 33705 rincipal Place of Business Mailing Address HARRY ARROTT TR DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For NOT APPLICABLE Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6.-Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) TUCKER, JOHN V ESQ 2101 FIFTH AVE. N. ST. PETERSBURG FL 33171 City Zip Code 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing Make Check Payable to **\$5.00** мау Ве Trust Fund Contribution. Added to Fees **Department of State** FEE IS \$61.25 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 DP ☐ Change ☐ Addition TITLE □ Delete TITLE NAME PARROTT, CATHIE NAME STREET ADDRESS 334 - 33RD AVENUE N.E. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL 33704 D۷ ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME WEST, JAMES NAME STREET ADDRESS 1923 - 9TH STREET SOUTH STREET ADDRESS -CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL 33705 D۷ Change ☐ Addition TITLE ☐ Detete TITLE NAME ANDERS, BARBARA NAME STREET ADDRESS 1847 ALMERIA WAY SOUTH STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL 33712 Change ☐ Addition TITLE TITLE **X** Delete NAME PATTERSON, DOROTHY NAME STREET ADDRESS STREET ADDRESS 847 HILLSIDE COURT SOUTH CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL 33705 ☐ Change □ Addition TITLE ☐ Delete TITLE PARROTT, HARRY JR NAME NAME STREET ADDRESS STREET ADDRESS 334 - 33RD AVENUE N.E. CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL 33704 ☐ Change ☐ Addition TITLE □ Delete TITLE BAKER, MARY NAME NAME STREET ADDRESS STREET ADDRESS 5110 ARAGON WAY SOUTH CITY-ST-ZIP CITY-ST-7IP ST. PETERSBURG FL 33705 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 is 1727)821 8266 changed, or on an attach