2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 16, 2008
Secretary of State

DOCUMENT# P07000024992

Entity Name: PEMBROKE PINES OPTIMIST, INC.

Current Principal Place of Business:

7400 PINES BOULEVARD
PEMBROKE PINES, FL 33024

New Principal Place of Business:

Current Mailing Address:

8430 N.W. 7TH STREET
PEMBROKE PINES, FL 33024

New Mailing Address:

FEI Number: 20-8830887 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROSS, JAMES
8430 NW 7TH STREET
PEMBROKE PINES, FL 33024 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: RAMOS, CARL
Address: 5600 SW 55 AVENUE
City-St-Zip: DAVIE, FL 33314

Title: VDR ( ) Delete
Name: ROSS, JAMES
Address: 8430 NW 7TH STREET
City-St-Zip: PEMBROKE PINES, FL 33024

Title: SDR ( ) Delete
Name: COHEN, KEITH
Address: 10950 TAFT STREET
City-St-Zip: PEMBROKE PINES, FL 33026

Title: TD ( ) Delete
Name: CASTERTON, ROBERT
Address: 1270 GULF VIEW DRIVE
City-St-Zip: PEMBROKE PINES, FL 33026

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change ( ) Addition
Name: RAMOS, CARL
Address: 5600 SW 55 AVENUE
City-St-Zip: DAVIE, FL 33314

Title: P (X) Change ( ) Addition
Name: ROSS JR., JAMES
Address: 8430 NW 7TH STREET
City-St-Zip: PEMBROKE PINES, FL 33024

Title: VP (X) Change ( ) Addition
Name: COHEN, KEITH
Address: 10950 TAFT STREET
City-St-Zip: PEMBROKE PINES, FL 33026

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES ROSS JR P 06/16/2008

Electronic Signature of Signing Officer or Director Date