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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **V16511** (0)

1. Corporation Name

FORT LAUDERDALE OPTIMIST CLUB, INC.



Principal Place of Business

**C/O BANK ATLANTIC
960 S POMPANO PARKWAY
POMPANO BEACH FL 33069**

Mailing Address

**C/O BANK ATLANTIC
4295 N. ANDREWS AVE.
FT. LAUDERDALE FL 33309
US**

2. Principal Place of Business

2a. Mailing Address

21 **C/O BANK ATLANTIC**

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 **4295 N. ANDREWS AVE**

27

City & State

City & State

23 **FT. LAUD FL**

28

Zip

Country

Zip

Country

24 **33309**

25 **USA**

29

30

9. Name and Address of Current Registered Agent

**HUGHES, LORENE
C/O BANK ATLANTIC
4295 N ANDREWS AVE
FT. LAUDERDALE FL 33309**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature and name are required)

DATE

12. OFFICERS AND DIRECTORS

TITLE **P** ☐ DELETE
NAME **PAIGE, GENE**
STREET ADDRESS **4295 N. ANDREWS AVE.**
CITY-STATE-ZIP **FT. LAUDERDALE FL**

TITLE **D** ☐ DELETE
NAME **HUGHES, LORENE**
STREET ADDRESS **4295 N. ANDREWS AVE.**
CITY-STATE-ZIP **FT. LAUDERDALE FL**

TITLE **ST** ☐ DELETE
NAME **GEIGER, STEPHEN**
STREET ADDRESS **4295 N. ANDREWS AVE.**
CITY-STATE-ZIP **FT. LAUDERDALE FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **OWNER PRESIDENT** ☒ Change ☐ Addition
1.2 NAME **OLIVER PARKER**

1.3 STREET ADDRESS
1.4 CITY-STATE-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME

2.3 STREET ADDRESS
2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME

3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME

4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME

5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME

6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

STEPHEN GEIGER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/20/96

305-973-3864
Display Phone #

CR2E034 (12/95)