

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000005677

1. Entity Name

OPTIMIST INTERNATIONAL YOUTH PROGRAMS FOUNDATION

FILED
Apr 28, 2000 8:00 am
Secretary of State

04-28-2000 90097 013 ****70.00

Principal Place of Business 4494 LINDELL BLVD. ST. LOUIS MO 63108	Mailing Address 4494 LINDELL BLVD. ST. LOUIS MO 63108-2404
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 43-1733736	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL	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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	D <input checked="" type="checkbox"/> Delete		TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	HUBBARD, JAMES H.		NAME	ROBERT L. GARNER	
STREET ADDRESS	214 OLD COUNTY ROAD		STREET ADDRESS	700 SUNSET DRIVE	
CITY-ST-ZIP	SEVERNA PARK MD 21146		CITY-ST-ZIP	CORAL GABLES, FL 33143	
TITLE	D <input checked="" type="checkbox"/> Delete		TITLE	D/V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	KATZ, CLIFTON I		NAME	DONALD R. SIEVERS	
STREET ADDRESS	25614-TIMPANGOS AVE		STREET ADDRESS	215 SUNSET LANE	
CITY-ST-ZIP	CALABASAS CA 91302		CITY-ST-ZIP	JACKSON, MO 63755	
TITLE	D <input checked="" type="checkbox"/> Delete		TITLE	D/V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	ATKINS, JOE D		NAME	DONALD CLAUSON	
STREET ADDRESS	1411 8TH ST		STREET ADDRESS	11 ELM DRIVE	
CITY-ST-ZIP	CORONADO CA 92118-2202		CITY-ST-ZIP	FAIRFAX, MN 55332	
TITLE	DP <input checked="" type="checkbox"/> Delete		TITLE	D/V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	SMITH, J WAYNE		NAME	ROBERT CONLEY	
STREET ADDRESS	2523 GLEN LANE		STREET ADDRESS	3344 KETTNER BLVD.	
CITY-ST-ZIP	INDEPENDENCE MO		CITY-ST-ZIP	SAN DIEGO, CA 92101	
TITLE	D <input checked="" type="checkbox"/> Delete		TITLE	D/V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	PRAGEN, RICHMOND		NAME	ROBERT DI GIULIO	
STREET ADDRESS	523 ARTHUR GODFREY RD		STREET ADDRESS	26242 MEADOWBROOK WAY	
CITY-ST-ZIP	MIAMI BCH FL 33140		CITY-ST-ZIP	LATHRUP VILLAGE, MI 48076	
TITLE	DST <input checked="" type="checkbox"/> Delete		TITLE	D/ST <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	LAWSON, STEPHEN P.		NAME	LOGAN M. GORE III	
STREET ADDRESS	4494 LINDELL BLVD		STREET ADDRESS	4494 LINDELL BLVD	
CITY-ST-ZIP	ST. LOUIS MO 63108		CITY-ST-ZIP	ST. LOUIS, MO 63108	

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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Logan M. Gore III 4/19/00 314-371-6000 ext. 200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)