

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katharine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Aug 11, 1999 8:00 am
Secretary of State

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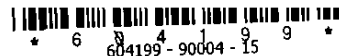
Corporation Name

OFFICIAL FORT LAUDERDALE BILLFISH
TOURNAMENT, INC.

Principal Place of Business

Mailing Address

ATTN: JOHN STEPHENS
220 S.W. 32nd STREET P.O. BOX#222181
FT. LAUDERDALE, FL. FT. LAUD., FL.
33315 33335-2218



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

01-23-67

1. Suite, Apt. #, etc.

2b. Suite, Apt. #, etc.

4. FEI Number

Applied For

23-7218760

Not Applicable

3. City & State

City & State

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

4. Zip

Country

Zip

Country

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JOHN E. STEPHENS
220 S.W. 32nd STREET
FT. LAUDERDALE, FL. 33315

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when resigning)

August 3, 1999

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PRESIDENT	☐ DELETE
NAME	JOHN E. STEPHENS	
STREET ADDRESS	220 S.W. 32nd STREET	
CITY-ST-ZIP	FT. LAUDERDALE, FL. 33315	
TITLE	VICE PRESIDENT	☐ DELETE
NAME	JAMIE STRAUSS	
STREET ADDRESS	311 S.W. 24th STREET	
CITY-ST-ZIP	FT. LAUDERDALE, FL. 33315	
TITLE	SECRETARY	☐ DELETE
NAME	KATHIE LANE	
STREET ADDRESS	2641 N.E.13th COURT	
CITY-ST-ZIP	POMPANO BEACH, FL. 33062	
TITLE	TREASURER	☐ DELETE
NAME	DOUG DASHER	
STREET ADDRESS	2173 IMPERIAL POINT DRIVE	
CITY-ST-ZIP	FT. LAUDERDALE, FL. 33308	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

John E. Stephens, President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
JOHN E. STEPHENS

August 3, 1999

Date

Daytime Phone if

954 767 1235