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Jul 30 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # **N93000002560 (1)**

1. Corporation Name

CORAL SPRINGS DIVING BOOSTER CLUB, INC.



Principal Place of Business

Mailing Address

**12441 ROYAL PALM BLVD.
CORAL SPRINGS FL 33065**

**2039 NW 104TH AVE.
CORAL SPRINGS FL 33071-5869**

3. Date Incorporated or Qualified
06/08/1993

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number
65-0416266

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**COMFORT, JEANNE
2039 N.W. 104TH AVE.
CORAL SPRINGS FL 33071**

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 title if applicable

(NOTE: Registered Agent signature required when re-nesting)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **P** ☒ DELETE
NAME **GARBIZO, BARBARA**
STREET ADDRESS **11231 NW 25TH ST.**
CITY-ST-ZIP **CORAL SPRINGS FL**

1.1 TITLE **President** ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE **HCD** ☐ DELETE
NAME **BURGERING, DAVE**
STREET ADDRESS **5100 CORONADO RIDGE**
CITY-ST-ZIP **BOCA RATON FL 33486**

2.1 TITLE **President Director** ☒ Change ☐ Addition
2.2 NAME **Burgering Dave**
2.3 STREET ADDRESS **5100 Coronado Ridge**
2.4 CITY-ST-ZIP **Boca Raton FL 33486**

TITLE **SD** ☒ DELETE
NAME **FOOS, GAYLE**
STREET ADDRESS **7415 NW 6TH CT.**
CITY-ST-ZIP **PARKLAND FL 33087**

3.1 TITLE **Vice President Director** ☐ Change ☒ Addition
3.2 NAME **Mary Ellen Antworth**
3.3 STREET ADDRESS **21010 Windemere Lane**
3.4 CITY-ST-ZIP **Boca Raton FL 33428**

TITLE **TD** ☐ DELETE
NAME **COMFORT, JEANNE**
STREET ADDRESS **2039 NW 104TH AVE**
CITY-ST-ZIP **CORAL SPRINGS FL 33071**

4.1 TITLE **Treasurer Director** ☐ Change ☐ Addition
4.2 NAME **Jeanne Comfort**
4.3 STREET ADDRESS **2039 NW 104th Ave**
4.4 CITY-ST-ZIP **Coral Springs Fla 33071**

TITLE **VP** ☒ DELETE
NAME **TAL, ANN LUREE**
STREET ADDRESS **5024 NW 102 DR**
CITY-ST-ZIP **CORAL SPRINGS FL**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE

SIGNATURE REQUIRED

CR2E037 (9/96)