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PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

FILED  
May 27 1997 8:00am  
Secretary of State

DOCUMENT # 539412 (7)

1. Corporation Name

ATHLETIC ATTIC PROPERTIES, INC.

Principal Place of Business

Mailing Address

18 NW 33RD COURT  
PO BOX 14503  
GAINESVILLE FL 32604

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PO BOX 14503  
GAINESVILLE FL 32604

3. Date Incorporated or Qualified 07/15/1977  
3a. Date of Last Report 01/27/1997

4. FEI Number 59-2906615  
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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THOMPSON, JACK B  
1418 NW 47TH TERR  
GAINESVILLE, FL  
32605

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 607.0511 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 must be witnessed by a Notary Public.

NOTE: Registered Agents are required to file this form.

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  
NAME LIQUORI, MARTIN W  
STREET ADDRESS 8020 NW 32ND ST  
CITY-STATE-ZIP GAINESVILLE, FL 00000

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-STATE-ZIP

TITLE SDT  
NAME SCHACKOW, GERALD  
STREET ADDRESS 112 NW 33RD COURT  
CITY-STATE-ZIP GAINESVILLE, FL 00000

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-STATE-ZIP

TITLE VD  
NAME CARNES, JAMES  
STREET ADDRESS 1330 NW SIXTH ST.  
CITY-STATE-ZIP GAINESVILLE, FL 00000

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-STATE-ZIP

TITLE V  
NAME THOMPSON, JACK B  
STREET ADDRESS 1418 NW 47TH TERR  
CITY-STATE-ZIP GAINESVILLE, FL 00000

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-STATE-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-STATE-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

6.1 TITLE  
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 as an attachment with an address.

SIGNATURE *Jack B Thompson* EUP

5/14/97

CP25034 (12/95)