

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **709659** (7)
1. Corporation Name
VOLUNTEER BOOSTERS OF GREATER LAKE LAND, INC.



Principal Place of Business Mailing Address
P.O. BOX 621 KATHLEEN FL 33849 **P.O. BOX 621 KATHLEEN FL 33849**

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 09/27/1965		3a. Date of Last Report 02/01/1995	
21		26		4. FEI Number 59-2739523		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
City & State		City & State		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
23		28					
Zip		Country		Zip		Country	
24		25		29		30	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
VANN, RAY 4912 PILGRIM LN LAKE LAND FL 33809				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				85 Zip Code			
				FL			

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY-ST-ZIP
	P	ROTH, MIKE	905 HAMMOCK SHADE DR LAKE LAND, FL 00000				
	VPD	MARTELLO, RODNEY	1228 BONNIE GLEN ST LAKE LAND FL		P	MARTELLO, RODNEY	1228 BONNIE GLEN ST LAKE LAND, FL 33809
	VPD	CALLAHAN, JR. J	13315 MISTI LOOP LAKE LAND FL				
	VPD	ROTH, JOANN	905 HAMMOCK SHADE DR LAKE LAND FL		VPD	TIBBETTS, DEREETHA	6615 FERNWOOD DR LAKE LAND, FL 33809
	T	VANN, RAY	4912 PILGRIM LN LAKE LAND, FL 00000				
	S	CLAY, CARRIE	5805 BAMBI DR LAKE LAND, FL 00000		S	JOHNSTON, DEBBIE L.	4633 SAN ANTONIO DR LAKE LAND, FL 33813

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: Ray Vann 1-30-96 941-665-4609
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (12/95)