

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Apr 15, 1999 8:00 am
Secretary of State

04-15-1999 90128 048 ****61.25

0055914

DOCUMENT # 719888

1. Corporation Name

SEMINOLE JUNIOR WARHAWKS ATHLETIC ASSOCIATION, INCORPORATED

Principal Place of Business

11500-125TH ST. N.
LARGO FL 34642
US

Mailing Address

P. O. BOX 7332
SEMINOLE FL 34642
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip 33774 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip 33775-7332 29 Country

3. Date Incorporated or Qualified

12/17/1970

4. FEI Number

59-0188572-51-0188572

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

9. Name and Address of Current Registered Agent

KING, F K
13119 CIMARRON CIRCLE S
LARGO FL 33774

10. Name and Address of New Registered Agent

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME NUNES, PETER
STREET ADDRESS 9740 122ND WY NO
CITY-ST-ZIP SEMINOLE FL 33772

TITLE SD ☐ DELETE

NAME PATRICK, GINGER
STREET ADDRESS 3928 15TH AVE SE
CITY-ST-ZIP LARGO FL

TITLE VPD ☐ DELETE

NAME BURNS, PAUL
STREET ADDRESS 10173 WEST BAY ST
CITY-ST-ZIP SEMINOLE FL

TITLE TD ☐ DELETE

NAME WALTERICK, SUE
STREET ADDRESS 14528 110 TH TERR N
CITY-ST-ZIP LARGO FL 33774

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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:

Sue Walterick SUE WALTERICK

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/7/99

Date

727-593-0938

Daytime Phone #

CR2E037 (11/98)