

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 732286 (0)

1. Corporation Name

PLANT CITY DOLPHIN FOOTBALL, INC.

Principal Place of Business

2605 W. REYNOLDS ST.
PO BOX 993
PLANT CITY FL 33567-4127

Mailing Address

2605 W. REYNOLDS ST.
PO BOX 993
PLANT CITY FL 33567-4127

FILED

96 SEP -6 AM 9: 53



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

29 Zip

30 Country

3. Date Incorporated or Qualified
03/27/1975

3a. Date of Last Report
10/16/1995

4. FEI Number

NOT APPLICABLE

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

POLING, MARIE A
1114 GARDEN ST
PLANT CITY FL 33566

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
NAME BREWINGTON, DAVID
STREET ADDRESS 5026 THONOTOSASSA RD.
CITY-ST-ZIP PLANT CITY FL

TITLE VD
NAME BREWINGTON, DIANE
STREET ADDRESS 5026 THONOTOSASSA RD
CITY-ST-ZIP PLANT CITY FL

TITLE SD
NAME STOREY, DAPHNE L.
STREET ADDRESS 4306 W. JOE SANCHEZ RD
CITY-ST-ZIP PLANT CITY FL

TITLE TD
NAME POLING, MARIE
STREET ADDRESS 1114 GARDEN ST
CITY-ST-ZIP PLANT CITY FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE D
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

President
Buddy BENNETT
1008 N. NANCY TERRACE
Plant City, FL 33566

21 TITLE D
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

Vice President
Brewington, David
5026 Thonotosassa Rd
Plant City FL

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

500001951305
-09/19/96 - 01021 003
*****61.25 *****61.25

9/18/96

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARIE A. Poling

8/5/96

Date

813 757-6696

Daytime Phone #

0011378

CR2E037 (3/96)