

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
JAMES B. ALPHANT
GOVERNOR
TAMMY M. MOTT
COMMISSIONER
1900 F.W. WATKINS AVE.

APPROVED
AND
FILED

SEP 11 1995

SECRETARY OF STATE
TAMMY MOTT, FLORIDA

DOCUMENT # **733644** (9)

WEST HERNANDO YOUTH ATHLETIC CLUB, INC.

Principal Place of Business: **2313 FOUNDER ROAD
P. O. BOX 5111
SPRING HILL FL 34606**

Mailing Address: **2313 FOUNDER ROAD
P. O. BOX 5111
SPRING HILL FL 34606**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Quoted 08/22/1975	3a. Date of Last Report 06/15/1994
4. FEI Number 59-2995102	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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for delinquency tax under § 120.025, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Zip 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**FREKEY, EDWARD H.
6195 FREEPORT DR.
SPRING HILL FL 34606**

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 607.0502 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 of Registered Agent or New Registered Agent)

(Signature of Registered Agent or New Registered Agent)

(Signature of Registered Agent or New Registered Agent)

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 1995	
12.1 NAME	PD LIPARITO, BILLIE	13.1 NAME	PRESIDENT D
12.2 STREET ADDRESS	3409 HARROW RD.	13.2 STREET ADDRESS	ANDY VENTAROTO
12.3 CITY, ST, ZIP	SPRING HILL FL	13.3 CITY, ST, ZIP	680 1120 SHENANDOAH LN
12.4 NAME	VD SHOWALTER, PATRICIA	13.4 NAME	SPRING HILL FL 34606
12.5 STREET ADDRESS	2455 ABELINE	13.5 STREET ADDRESS	
12.6 CITY, ST, ZIP	SPRING HILL FL	13.6 CITY, ST, ZIP	
12.7 NAME	VD CONSTANTINE, WILLIAM	13.7 NAME	SECRETARY D
12.8 STREET ADDRESS	3482 EL GROVE ST.	13.8 STREET ADDRESS	LEANNE GERMAN
12.9 CITY, ST, ZIP	SPRING HILL FL	13.9 CITY, ST, ZIP	4523 LAKE IN THE WOODS DR.
12.10 NAME	SD DAMPIER, KELLY	13.10 NAME	SPRING HILL FL 34607
12.11 STREET ADDRESS	4560 KEYSVILLE AVE.	13.11 STREET ADDRESS	
12.12 CITY, ST, ZIP	SPRING HILL FL	13.12 CITY, ST, ZIP	
12.13 NAME	DT FREKEY, BRENDA G	13.13 NAME	
12.14 STREET ADDRESS	6195 FREEPORT DR.	13.14 STREET ADDRESS	
12.15 CITY, ST, ZIP	SPRING HILL FL	13.15 CITY, ST, ZIP	
12.16 NAME	D VENDRONE, DONALD	13.16 NAME	
12.17 STREET ADDRESS	5025 FREEPORT DR.	13.17 STREET ADDRESS	
12.18 CITY, ST, ZIP	SPRING HILL FL	13.18 CITY, ST, 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)(b), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/95 (904) 546-9614