

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 8, 1995.
AMOUNT DUE ON OR BEFORE 8/8/95: \$185 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$295)

NONPROFIT
CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

DOCUMENT # 737329

(3)

1. Corporation Name

SPORT BOOSTERS, INC.

95 JUL -3 PM 2:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

5624 26TH ST W
PO BOX 10213
BRADENTON FL 34207-3515

Mailing Address

5624 26TH ST W
PO BOX 10213
BRADENTON FL 34207-3515

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
11/17/1976

3a. Date of Last Report
10/05/1994

4. FEI Number
59-1849813

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 ☐ FILING FEE IS
\$61.25

8. This corporation has liability for filing fees under s. 109.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt #, etc

23 City & State

24 Zip

25 County

2a. Mailing Address

26 Suite, Apt #, etc

28 City & State

29 Zip

30 County

9. Name and Address of Current Registered Agent

SCHAFFER, MELVIN J.
3802 17TH AVE. DRIVE WEST
BRADENTON FL 34205

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 the 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 of person (individual) named as registered agent and the President

Signature of Registered Agent (signature required when reappointing)

(Date)

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	MENIG, JOHN
STREET ADDRESS	435 30TH AVE. W. 302D
CITY, ST, ZIP	BRADENTON FL
TITLE	D
NAME	ZIMMERMAN, MARVIN
STREET ADDRESS	7254 KING DRIVE
CITY, ST, ZIP	PALMETTO FL
TITLE	SD
NAME	HUBBARD, FRANCES B.
STREET ADDRESS	1212 56TH STREET WEST
CITY, ST, ZIP	BRADENTON FL 34205
TITLE	PD
NAME	SCHAFFER, MELVIN J.
STREET ADDRESS	3802 17TH AVE. DR., WEST
CITY, ST, ZIP	BRADENTON FL 34205-1423
TITLE	D
NAME	SMITH, GEORGE
STREET ADDRESS	408 53RD AVE WEST
CITY, ST, ZIP	BRADENTON FL 34207
TITLE	TD
NAME	THIBODEAU, GEORGE
STREET ADDRESS	503 MONTEZUMA DR.
CITY, ST, ZIP	BRADENTON FL 34209

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY, ST, ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY, ST, ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY, ST, ZIP	

14. I 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 or changed, or on an attachment with an address.

SIGNATURE:

George Thibodeau
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Thibodeau, George

6/28/95

941-746-6119