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Jun 27 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 738771 (5)

1. Corporation Name

TAMPA BAY BUC'S BOOSTER CLUB, INC.



Principal Place of Business	Mailing Address
3957 PORPOISE DR SE ST PETERSBURG FL 33705 US	3957 PORPOISE DR SE ST PETERSBURG FL 33705-4029 US

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report
21 212 S. O'BRIEN ST.	26 212 S. O'BRIEN ST.	04/21/1977	04/15/1996
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.	4. FEI Number	Applied For
		59-1733447	Not Applicable
23 City & State	28 City & State	5. Certificate of Status Desired	\$8.75 Additional Fee Required
TAMPA FLORIDA	TAMPA FLORIDA		
24 Zip	25 Country	6. Election Campaign Financing	\$5.00 May Be Added to Fees
33609		Trust Fund Contribution	
	29 Zip	30 Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes
	33609		Yes No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
MERRILL, SHERYL 3957 PORPOISE DR SE ST PETERSBURG FL 33705	81 Name BILL CURLIN 82 Street Address (P.O. Box Number is Not Acceptable) 212 S. O'BRIEN ST. 83 84 City TAMPA FL 85 Zip Code 33609

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 *Bill Curlin* - (BILL CURLIN) PRESIDENT 4-2-97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	(D) PRESIDENT
NAME	MERRILL, SHERYL	1.2 NAME	CURLIN, BILL
STREET ADDRESS	3957 PORPOISE DR SE	1.3 STREET ADDRESS	212 S. O'BRIEN ST
CITY-ST-ZIP	ST PETERSBURG FL	1.4 CITY-ST-ZIP	TAMPA, FL 33609
TITLE	VP	2.1 TITLE	(D) VICE PRESIDENT
NAME	CURLIN, WILLIAM	2.2 NAME	MERRILL, SHERYL
STREET ADDRESS	212 S. O'BRIEN STREET	2.3 STREET ADDRESS	3957 PORPOISE DR SE
CITY-ST-ZIP	TAMPA FL	2.4 CITY-ST-ZIP	ST PETERSBURG FL 33705
TITLE	(+) P	3.1 TITLE	
NAME	PALMER, DAVID	3.2 NAME	
STREET ADDRESS	5305- E 98TH AVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	TEMPLE TERRACE FL	3.4 CITY-ST-ZIP	
TITLE	T	4.1 TITLE	(D) TREASURER
NAME	JONES, NORMAN E II	4.2 NAME	ARNOLD, DARLENE
STREET ADDRESS	5805-S LOIS AVE	4.3 STREET ADDRESS	2377 EASTWOOD DR
CITY-ST-ZIP	TAMPA FL	4.4 CITY-ST-ZIP	CLEARWATER FL 34625
TITLE	D	5.1 TITLE	(+) S
NAME	O'DONNELL, DIANNE	5.2 NAME	MILLER, RITA
STREET ADDRESS	2413 BAYSHORE BLVD #1506	5.3 STREET ADDRESS	675 N INDIAN ROCKS RD APT 2-B
CITY-ST-ZIP	TAMPA FL	5.4 CITY-ST-ZIP	BELLERIA BLUFFS FL 33170
TITLE	D	6.1 TITLE	(+) S
NAME	STIERWALT, JOHN	6.2 NAME	GORDON, HARRY
STREET ADDRESS	2222 BEACH BLVD SOUTH	6.3 STREET ADDRESS	2413 BAYSHORE BLVD #2106
CITY-ST-ZIP	GULFPORT FL	6.4 CITY-ST-ZIP	TAMPA FL 33629

14. I do 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.

SIGNATURE *R. J. ...* 4-2-97 (212) 292-0174

CR2E037 (9/96)