

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 09, 2007 8:00 am**  
**Secretary of State**

04-09-2007 90072 007 \*\*\*61.25

**DOCUMENT # 745698**

1. Entity Name  
**BIG PINE ATHLETIC ASSOCIATION, INC.**



Principal Place of Business  
**30415 LYTTONS WAY  
BIG PINE KEY, FL 33043 US**

Mailing Address  
**PO BOX 430089  
BIG PINE KEY, FL 33043 US**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03012007 Chg-NP CR2E037 (12/06)

4. FEI Number  
**59-2255760**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WADE, SCOTT  
29161 HIBISCUS LN.  
BIG PINE KEY, FL 33043**

Name **Scott Wade**  
Street Address (P.O. Box Number is Not Acceptable)  
**1118 Big Pine Ave**  
City **Big Pine Key** FL Zip Code **33043**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/22/07  
DATE

**Filing Fee is \$61.25  
Due by May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete  
NAME **PD MILLER, STEVE**  
STREET ADDRESS **29245 OLEANDER DR.**  
CITY-ST-ZIP **BIG PINE KEY, FL 33044**

TITLE ☐ Delete  
NAME **T O'BRIEN, JASON**  
STREET ADDRESS **423 LESROHDE DR**  
CITY-ST-ZIP **RAMROD KEY, FL 33042**

TITLE ☐ Delete  
NAME **VPD HUGHES, LEE**  
STREET ADDRESS **29563 SARASOTA AVE**  
CITY-ST-ZIP **BIG PINE KEY, FL 33043**

TITLE ☐ Delete  
NAME **S BISHOP-MILLER, SUSAN**  
STREET ADDRESS **P.O. BOX 430291**  
CITY-ST-ZIP **BIG PINE KEY, FL 33043**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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STREET ADDRESS  
CITY-ST-ZIP

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STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with or other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/22/07  
Date

305-872-0292  
Daytime Phone #