FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

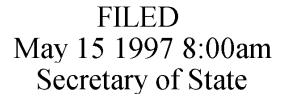
Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

749316

(6)

FLORIDA SUNSPOKES WHEELCHAIR SPORTS AND RECREATI ON ASSOCIATION, INC.





Principal Place of Business 7736 MITCHELL RANCH RD. NEW PORT RICHEY FL 34655		Mailing Address				i 1401ti 184ti Ardin reind seint bitt ditt micht minn audit eiste miste aufer aufer aufer aufer				
		7736 MITCHELL RANCH RD. NEW PORT RICHEY FL 34655-3246								
						3. Date Incorporated or Qualified 10/15/1979	3a. Da	e of Las 02/13	st Report /1996	
2. Principal P	ace of Business	2a. Mailing Address						Applied For		
21		26						Not Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			5 Additional		
22		[27]					Fee	Required		
City & State	Ø	City & State			6. Election Campaign Financing	П	\$5.00 May Be			
23		Zip Country				1 rust Fund Contribution	<u> </u>		ed to Fees	
Zip	Country Zip					8. This corporation has liability for i			er s. 199.032,	
24	25 29 9. Name and Address of Current Registered Agent		30				Florida Statutes Yes KN No Name and Address of New Registered Agent			
	5. Hamo and Addioso C. Carro	in nogistorou Agont		61	Name	To, Hallie and Addison of Not the	g.o.c.o.			
DIAMOL	ii, erika		ļ							
	TCHELL RANCH RD.		82 Street Ac			fress (P.O. Box Number is Not Acceptab	ole)			
	ORT RICHEY FL 34655		ł	83						
HEALL	0711 THORIET TE 04000		1	_				1-1-		
			1	64	City		FI	85 2	rip Code	
11. Pursuant	to the provisions of Sections 617.05	02 and 617.1508. Florida Statu	ules, the ab	L	o-named cor	poration submits this statement for the p		<u>L L</u> changir	g its registered	
office or r	egistered agent, or both, in the State	of Florida, Such change was	authorized	yd r	the corpora	poration submits this statement for the pation's board of directors. I hereby accept	ot the appo	ointment	as registered	
	in familial with and accept the obig	gations of, Section 617.0303, 1	ionua siati	Ulos	1.					
SIGNATURE .	Signature, typed or printed name of registered as	ent and title if applicable (NC	OTE: Registered	J Age	ent signature requ	ired when reinstating)	DATE			
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE	ERS AND	DIBLC	ORS IN 12	
TITLE	SD DELETE		1.1 1/1	TLE	Ţ			Chan	ge Addition	
NAME	Sullivan, John		1.2 NA	ME]					
STREET ADDRESS	10603 CHAMBERS DRIVE		1.3 \$1	REET	ADDRESS					
CITY-ST-ZIP	TAMPA FL		1.4 CH	1Y - S	1-ZIP					
TITLE	TD	☐ DELETE	DELETE 2.1 10					☐ Chan	ge 🔲 Addition	
NAME	BIANCHI, ERIKA		2.2 NA	ME	1					
STREET ADDRESS	7736 MITCHELL RNCH RD		2.3 ST	REET	ADDRESS					
CITY-ST-ZIP	NEW PORT RICHEY FL		2. 4 CITY-ST-ZIP		ST-ZIP					
TITLE	VD DELETE		3 1 TIT	3.1 TITLE				Chan	ge 🔲 Addition	
NAME	SIGLER, EUGENE		3.2 NA	ME						
STREET ADDRESS	9405 EDENTON WAY		3.3 ST	REET	ADDRESS					
CITY-ST-ZIP	TAMPA FL		3.4. Cl	TY-S	ST-ZIP					
TITLE	PD	DELETE	DELETE 4.1 TI					Chan	ge 🔲 Addition	
NAME	MILLER,KEN		4. 2 N	AME	1					
STREET ADDRESS	6024 WILSHIRE DR.		4.3 \$1	REET	ADDRESS					
CITY-ST-ZIP	TAMPA FL		4.4 CI	IY-S	T-ZIP					
TITLE		DELETE	5.1 T(1	ILE				Chan	ge 🔲 Addition	
NAME .	{		5.2 NA	IME						
STREET ADDRESS			5.3 ST	REET	ADDRESS					
CITY-ST-ZIP			5.4 CIT	1Y-S	1-2IP					
TIŢLE		DELETE	6.1 111	fLE.				Chan	ge 🔲 Addition	
NAME			6.2 NA	ME						
STREET ADDRESS	}		63 ST	REFT	ADDRESS					
CITY-ST-ZIP			6.4 CII	TY-S	i) - ZiP					
Ad Lab Com		A self-residence of the self-residence of th	Pr L II			al la One time 440 07(0)(). Flexible Otable	1.6		1 1 11	

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 logal 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.

CNATTURE: