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Jul 06 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mathiam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **760278**
1. Corporation Name
Santa Fe Athletic Association, Inc.

Principal Place of Business Mailing Address
**5821 Westmont Rd
Milton, Florida 32583**

100002580361
-07/06/98--01070--022
***70.00

2. Principal Place of Business 21 Milton FL Suite, Apt. #, etc.	2a. Mailing Address 26 P.O. Box 293 Milton FL 32583 Suite, Apt. #, etc.
22 City & State 23 Milton FL	27 City & State 28 Milton, FL
24 Zip 32583 Country	29 Zip 32570 Country USA

3. Date Incorporated or Qualified	4. FEI Number 59-2155021	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

9. Name and Address of Current Registered Agent
**Bill Sesto
6809 Lanesome Line
Milton, Florida 32570**

81 Name Randall Maxwell	85 Zip Code 32583
82 Street Address (P.O. Box Number is Not Acceptable) 5821 Westmont Rd	
83 City Milton	
84 State FL	

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 **Randall Maxwell** **13 Jun 98**
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Bill Sesto 6809 Lanesome Line, Milton, FL 32570
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Teresa Williams Unknown
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	President (D) Director Randall Maxwell 5821 Westmont Rd Milton, FL 32583
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	Vice-President (D) Director Darla Robertson P.O. Box 293 (N/A) Milton FL 32583
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	Donna Rodgers (D) Director Secretary P.O. Box 293 (N/A) Milton, FL 32583
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	Treasurer Diane Tremont (N/A) P.O. Box 293 Milton, FL 32583
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	Board member (D) Director Lisa White P.O. Box 293 (N/A) Milton, FL 32583
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	Board member Tim Banks (N/A) P.O. Box 293 Milton, FL 32583

14. I 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: **Randall Maxwell President, SRAA** **13 Jun 98 (850) 983-7415**

CR2E037 (10/97)