


FILE NOW: FILING FEE IS \$61.25

FILED
Mar 16 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **760764** (1)
1. Corporation Name
NEW SMYRNA BEACH BARRACUDA BOOSTER CLUB, INC.



Principal Place of Business 100 BARRACUDA BLVD P.O. BOX 2686 NEW SMYRNA BEACH FL 32170	Mailing Address 100 BARRACUDA BLVD P.O. BOX 2686 NEW SMYRNA BEACH FL 32170
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3. Date Incorporated or Qualified 11/19/1981	
4. FEI Number 59-2159662	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input 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 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 type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent PETERSON, JR., SID C. 418 CANAL STREET NEW SMYRNA BEACH FL 32169	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	OWENS, PAM	1.2 NAME	
STREET ADDRESS	2201 SIERRA DR.	1.3 STREET ADDRESS	TD SAME
CITY-ST-ZIP	NEW SMYRNA BEACH FL	1.4 CITY-ST-ZIP	
TITLE	S	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NELSON, LYNN	2.2 NAME	S Cheryl Davis
STREET ADDRESS	317 DUE EAST ST	2.3 STREET ADDRESS	1401 Caliban Ct.
CITY-ST-ZIP	NEW SMYRNA BCH FL	2.4 CITY-ST-ZIP	New Smyrna Beach, FL 32168
TITLE	PD	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EARLEY, DAVID	3.2 NAME	PD Glenn Herbert
STREET ADDRESS	1480 TATUM BLVD.	3.3 STREET ADDRESS	4170 Saxon Dr.
CITY-ST-ZIP	NEW SMYRNA BEACH FL	3.4 CITY-ST-ZIP	New Smyrna Beach, FL 32169
TITLE	VD	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CRAIN, EDDIE	4.2 NAME	VD Cindy Steele
STREET ADDRESS	834 E 13TH AVE.	4.3 STREET ADDRESS	466 Palmetto St
CITY-ST-ZIP	NEW SMYRNA BEACH FL	4.4 CITY-ST-ZIP	Edgewater, FL 32141 3a
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 _____ 3-9-98

CP2E037 (10/97)