FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPAREMENT OF STATE

Sandra B. Mortham

Secretary of State
Division OF CORPORATIONS

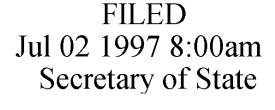
1997
DOCUMENT # 764972

(6)

EAST BAY HIGH SCHOOL ATHLETIC BOOSTERS ASSOCIATION, INC.

Principal Place of Business
7710 BIG BEND ROAD

Mailing Address





710 BIG BEND ROAD 7710 BIG BEND ROAD 8BSONTON FL 33534 GIBSONTON FL 33534-5706					
				3. Date Incorporated or Qualified 09/13/1982	3a. Date of Last Report 05/01/1996
2. Principal Place of Business 2s	. Mailing Address			4. FEI Number	Applied For
21 26				59-2903770	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.				CO 75 Additional
22 27				5. Certificate of Status Desired	Fee Required
City & State	City & State			6. Election Campaign Financing	\$5.00 May Be
28	Zip	Countr		Trust Fund Contribution	☐ Added to Fees
Zip Country			у	8. This corporation has liability for i	ntangible tax under s. 199,032, Yes 💢 No
24 25 29 29 29 29 26 27 29 29 29 29 29 29 29 29 29 29 29 29 29		30		10. Name and Address of New Re	
S, reside and Address of Current trogs	attitud regont	81	Name	IV. Italia uno Addiose di Italia	giotora Again
1811 10F 61107					
VILLAGE BANK		82	Street	Address (P.O. Box Number is Not Acceptab	le)
131 S. PEBBLE BEACH BLVD.					
SUN CITY CENTER FL 33570		8:	<u>'</u>		
		84	City		FL 85 Zip Code
11. Pursuant to the provisions of Sections 617.0502 and office or registered agent, or both, in the State of Flor	617.1508, Florida Statute ida. Such change was a	es, the about	e-named by the corp	corporation submits this statement for the poration's board of directors. I hereby accep	urpose of changing its registered of the appointment as registered
agent. I am familiar with, and accept the obligations of SIGNATURE	of, Section 617.0503, Flo	rida Statute	s.		
Signature, typed or printed name of registered agent and titl	e if applicable. (NOTE	: Rogislered Ag	ent signature	required when reinstating)	DATE
12. OFFICERS AND DIRE		13.		ADDITIONS/CHANGES TO OFFIC	
TITE PD	☐ DELET€	1.1 TITLE			Change Addition
NAME DOTSON, RANDY - D		1.2 NAME			l!
STREET ADDRESS 1121 KINGFISH PLACE		1.3 STREE	I ADDRESS];
CITY-ST-ZIP APOLLO BEACH FL		1.4 CITY-	SI - ZIP]]
TITLE SECD	DELETE	2.1 TITLE	_	TURRI L. McGinnis - D 6902 Potts Rd. Riverview. FL 88569	Change 🔀 Addition
NAME MYUNAHAN, JOAN	•	2 2 NAME		TURRI L. McGINNIS - D	
STREET ADDRESS 6607 BLACKFIN WAY		2.3 STREE	T ADDRESS	6902 Potts Rd.	
CITY-ST-ZIP APOLLO BEACH FL		2. 4 CITY	ST-ZIP	Riverview, FL 88569	ì
TITLE TRED	DELETE	3.1 TITLE			Change Addition
NAME CONNELL, SYLVIA — D		3.2 NAME			1
STREET ADDRESS 10021 CARR ROAD		3.3 STREE	T ADDRESS		į
CITY-ST-ZIP RIVERVIEW FL		3.4. CITY	ST-ZIP		1
TITLE	DELETE	4.1 TITLE			Change Addition
NAME		4. 2 NAM			ŀ
STREET ADDRESS		4.3 STREE	T ADDRESS		
CITY-ST-ZIP		4.4 CITY-			ì
TITLE	DELETE	5.1 TITLE			Change Addition
NAME		5.2 NAME			
STREET ADDRESS		•	T ADDRESS		1
) ···)		1			1
CITY-ST-ZIP	DELETE	5.4 City- 6.1 Title	31-AP		Change Addition
				}	E charge E notifier
NAME		6.2 NAME			ĺ
STREET ADDRESS CITY-ST-ZIP					
		6.3 STREE 6.4 City -	T ADDRESS		\

14. 1 do hereby centry that the information supplied with this thing does not quality for the exemption stated in Section 113-07(3)(i), Fortida Statutes. Fitting 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.

LOS CALLANDERS AND CONTRACTOR