

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 766756 (1)
1. Corporation Name
SEMINOLE HIGH SCHOOL BASEBALL BOOSTERS CLUB, INC.



Principal Place of Business Mailing Address
8401-131ST STREET NORTH 8401-131ST STREET NORTH
ATTN: BILL BRINKER Richard Chapman ATTN: BILL BRINKER Richard Chapman
SEMINOLE FL 33542 SEMINOLE FL 33542

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 01/28/1983		3a. Date of Last Report 03/27/1995	
21		26		4. FEI Number 59-2871541		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Zip		Zip		6. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
24		25		29		30	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
MCAVADDY, JAMES F 9471 - 117 ST NORTH SEMINOLE FL 34642				81 Name DAVE C. PANO 82 Street Address (P.O. Box Number is Not Acceptable) 9624 134th St N 83 David Pano 84 City SEMINOLE FL 85 Zip Code 33542			

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

David Pano David Pano 2/16/96

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	STD
NAME	PANO, DAVE C.	1.2 NAME	Meg Stegbauer
STREET ADDRESS	9624 134TH ST N.	1.3 STREET ADDRESS	8275 140th St N
CITY-ST-ZIP	SEMINOLE FL	1.4 CITY-ST-ZIP	SEMINOLE, FL
TITLE	VD	2.1 TITLE	
NAME	BULTMANN, KURT	2.2 NAME	
STREET ADDRESS	8001 124TH ST N.	2.3 STREET ADDRESS	
CITY-ST-ZIP	SEMINOLE FL	2.4 CITY-ST-ZIP	
TITLE	STD	3.1 TITLE	
NAME	MCAVADDY, JAMES F	3.2 NAME	
STREET ADDRESS	9471-117 ST NO	3.3 STREET ADDRESS	
CITY-ST-ZIP	SEMINOLE FL	3.4 CITY-ST-ZIP	
TITLE	STD	4.1 TITLE	
NAME	Meg Stegbauer	4.2 NAME	
STREET ADDRESS	8275 140th St N	4.3 STREET ADDRESS	
CITY-ST-ZIP	SEMINOLE, FL	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Meg Stegbauer Meg Stegbauer 2/13/96 (813) 547-7536

CR2E037 (12/95)