


FILED
Apr 27, 1999 8:00 am
Secretary of State

04-27-1999 90158 030 ****70.00

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 766756

1. Corporation Name
SEMINOLE HIGH SCHOOL BASEBALL BOOSTERS CLUB, INC.

Principal Place of Business 8401-131ST STREET NORTH RICHARD CHAPMAN SEMINOLE FL 33776 US	Mailing Address 8401-131ST STREET NORTH RICHARD CHAPMAN SEMINOLE FL 33776 US
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2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 01/28/1983
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-2871541
City & State 23	City & State 28	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required
Zip 24	Country 25	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent GEORGE LAZARIS 12452 111ST PLACE N SEMINOLE FL 33542	10. Name and Address of New Registered Agent 81 Name Ray Kozlowski 82 Street Address (P.O. Box Number is Not Acceptable) 10701-59th Ave. 83 84 City Seminole FL 85 Zip Code 33776
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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 Ray A. Kozlowski RAY A. Kozlowski 4/20/99
Signature typed or printed Name of registered agent; and title if applicable. (NO E: Registered Agent signature required when reinstating.) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD NAME GEORGE LAZARIS STREET ADDRESS 12452 81ST PL N CITY-ST-ZIP SEMINOLE FL	<input checked="" type="checkbox"/> DELETE	1.1 TITLE President 1.2 NAME Ray Kozlowski 1.3 STREET ADDRESS 10701-59th Ave. N. 1.4 CITY-ST-ZIP Seminole, FL 33776	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VD NAME HART, MARTY STREET ADDRESS 13076 FOREST DR CITY-ST-ZIP SEMINOLE FL 33776	<input checked="" type="checkbox"/> DELETE	2.1 TITLE VICE PRESIDENT 2.2 NAME Sue Katchman 2.3 STREET ADDRESS 8442-125th Ct. N. 2.4 CITY-ST-ZIP Seminole, FL 33776	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE STD NAME STEGBAUER, MEG STREET ADDRESS 8275 140TH ST N CITY-ST-ZIP SEMINOLE FL	<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 my address, with all other like empowered.

SIGNATURE: Ray Kozlowski RAY A. Kozlowski 4/20/99 127-541-136
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (11/98)