

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 AM 9:13

DOCUMENT # 767889 (9)

1. Corporation Name

TITUSVILLE TERRIER BOOSTER CLUB, INC.

Principal Place of Business

Mailing Address

2885 LAS PALMAS DRIVE
P. O. BOX 1403
TITUSVILLE FL 32780-2218

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P. O. BOX 1403
TITUSVILLE FL 32780-2218

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/11/1983

3a. Date of Last Report

07/26/1994

4. FBI Number

59-2284314

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 6021 BANBURY AVENUE

26 PO BOX 1403

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MR. AND MRS. JOS. LACKOVICH
2885 LAS PALMAS DRIVE
TITUSVILLE FL 32780

81 Name

MRS. PATTY GREEN

82 Street Address (P.O. Box Number is Not Acceptable)

6021 BANBURY AVENUE

83

84 City

COCOA

FL

85 Zip Code
32927

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

PATTY GREEN (T)

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

(NOTE: Registered Agent signature required when re-registering)

4/12/95

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	HOMER, JOANNE
STREET ADDRESS	1765 BINIBI STREET
CITY - ST - ZIP	TITUSVILLE FL
TITLE	VP
NAME	NAGY, MICHAEL
STREET ADDRESS	6947 BISMARCK ROAD
CITY - ST - ZIP	COCOA FL
TITLE	SD
NAME	KRUPP, VIVIAN
STREET ADDRESS	985 WILLIAMSBURG DRIVE
CITY - ST - ZIP	TITUSVILLE FL
TITLE	T
NAME	LACKOVICH, JOS MR. & MRS.
STREET ADDRESS	2885 LAS PALMAS DRIVE
CITY - ST - ZIP	TITUSVILLE, FL 32780
TITLE	D
NAME	LONG, DONNA
STREET ADDRESS	7315 TURKEY POINT DRIVE
CITY - ST - ZIP	TITUSVILLE FL
TITLE	D
NAME	SPARKMAN, GREG
STREET ADDRESS	4595 HELENA DRIVE
CITY - ST - ZIP	TITUSVILLE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P/P	☒ Change ☐ Addition
1.2 NAME	SPROUSE, ROBERT	
1.3 STREET ADDRESS	4449 PONDS DRIVE	
1.4 CITY - ST - ZIP	COCOA, FL 32927	
2.1 TITLE	V/D	☒ Change ☐ Addition
2.2 NAME	ABATING, RON	
2.3 STREET ADDRESS	7231 ACHILLES ROAD	
2.4 CITY - ST - ZIP	COCOA, FL	
3.1 TITLE	V/D	☒ Change ☐ Addition
3.2 NAME	CIANFROCCO, ANGELO	
3.3 STREET ADDRESS	6775 CALUSA AVENUE	
3.4 CITY - ST - ZIP	COCOA, FL	
4.1 TITLE	V/D	☒ Change ☐ Addition
4.2 NAME	HICKS, RICK	
4.3 STREET ADDRESS	6150 CLEARFIELD AVENUE	
4.4 CITY - ST - ZIP	COCOA, FL	
5.1 TITLE	S	☒ Change ☐ Addition
5.2 NAME	BARDEN, PAT	
5.3 STREET ADDRESS	1785 NASSAU DRIVE	
5.4 CITY - ST - ZIP	TITUSVILLE, FL 32780	
6.1 TITLE	T/D	☒ Change ☐ Addition
6.2 NAME	GREEN, PATTY	
6.3 STREET ADDRESS	6021 BANBURY AVENUE	
6.4 CITY - ST - ZIP	COCOA, FL	

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 110.07(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 recorder 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-12-95 (407) 264-5230

Date

Telephone Area 2