FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F09751

(1)

FLORI	DA COURT SPORTS INC.							
Principa! P	lace of Business	Mailing Address			- 19600 144 644 (646 666) 944 64	T ELEVI ELEVI ELEV		HER HEAL
2900 4TH ST. NO #BIOI 2900 4TH ST. NO #BIOI ST PETERSBURG FL 33704 ST PETERSBURG FL 3370			N-2154					
i					3. Date Incorporated or Qualified 10/22/1980	3a. Date 04/12/		eport
2. Principa	Place of Business	2a. Mailing Address			4. FEI Number	Applied For		
21		26			59-2055577		·,···	t Applicable
Suite, A	spl. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired		\$8.75 / Fee Re		
C-ly 8 S	State	City & State			6. Election Campaign Financing	***************************************	\$5.00	·
23		28			Trust Fund Contribution		Added t	
Zip	Country	Zip	Country	****	6. This corporation has liability for			199.032,
24	25	29	30			Yes 🔽		,
	9. Name and Address of Curren	nt Registered Agent	81)	Name	10. Name and Address of New R	agistered Ag	ent	
	HAMBERS, JOSEPH			Marine				
520 4TH ST, N ST. PETERSBURG FL 33701			82	Street Addr	ess (P.O. Box Number is Not Accepta	,ble)		
)	I. PETERSDUNG PL 33/01		83					
			' Li					
			84	City		FL	85 Zip (Code
SIGNATUR	Signatine system or printed name of registered ag	ert and title if applicable. (NO	TE Registered Agen		ed when reinstating)	DATE		
12.		ID DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFF		TRECTOR Change	S IN 12
i lit.F	PD CHAMBERS, CAROL B.	☐ DELETE	1.1 TITLE	1		ــا	1 Change	L.J ADOILION
NAMI STREET ADDRE	S 848-MICHA OT NE 13	1 23rd aven	1.2 NAME 1.3 STREET A	DODCCC				
City-St-ZIP	· .	704	1.4 CITY-SF	i				
1ITLE	33	☐ DELETE	2.1 TITLE	- 1			Change	Addition
NAVE			2.2 NAME	}				
STREET ADDRE	ss		2.3 STREET A	DDRESS				
CITY-S1-7P			2 4 CITY-ST	-ZIP				
TOTALE		☐ DELETE	3.1 TITLE	ļ		Ľ.	Change	Addition
NAME			3.2 NAME		1	e-2-		
STREET ADDRE	SS		3.3 STREET A					
TITLE		DELETE	3.4. CITY-ST	- ZiP			Change	Addition
NAME		E MICCIL	4.1 III.E 4.2 NAME	ļ		Ļ	7 ALMINO	raumoni.
STREET ADDRE	99		4.2 TOWNE	IDDRESS				
CITY-ST-ZIF	100		4.4 City-St	1				
TITLE		DELETE	5.1 TITLE			Т	Change	Addition
NAME			5.2 NAME	ŀ				
STREET ADDRE	ss		5.3 STREET A	IDDRESS				

14. I do 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or on an attachment with an address.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

61 TITLE

6.2 NAME

SIGNATURE:

CITY - ST - ZIP

STEET ALDRESS

DITY-ST-7IP

1-TLF

DELETE

Change

Addition

FILED

May 14 1997 8:00am

Secretary of State