

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 18, 2008 8:00 am
Secretary of State

02-18-2008 90009 021 ****61.25

DOCUMENT # N00000001707

1. Entity Name

INNER CITY VARSITY CLUB INCORPORATED



Principal Place of Business

4787
4646 N.W. 17TH AVENUE
MIAMI FL 33142

Mailing Address

4787
4646 N.W. 17TH AVENUE
MIAMI FL 33142

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1047413

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/07)



6. Name and Address of Current Registered Agent

WILLIAMS, JOHN A
4646 N.W. 17TH AVENUE
MIAMI FL 33142

7. Name and Address of New Registered Agent

Name

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

4707 N.W. 17th Ave

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

John A. Williams

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW FEE IS \$61.25

Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE P
NAME ARMBRISTER, THOMAS S
STREET ADDRESS 4646 NW 17TH AVE 4707 NW 17 AVE
CITY- ST- ZIP MIAMI FL 33142 ☐ Delete

TITLE S
NAME RICHARDSON, ALFONSO
STREET ADDRESS 5964 NW 201 ST TERR
CITY- ST- ZIP MIAMI FL 33015 ☐ Delete

TITLE T
NAME WILLIAMS, JOHN A
STREET ADDRESS 16141 W. BUNDIE PK DRIVE
CITY- ST- ZIP MIAMI FL 33142 ☐ Delete

TITLE VP
NAME OTIS, DAVIS
STREET ADDRESS 4646 NW 17TH AVE 4707 NW 17 AVE
CITY- ST- ZIP MIAMI FL 33142 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
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CITY- ST- ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY- ST- ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

John A. Williams - John A. Williams 2-7-08 305-6369717

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR