

FILE NOW: FILING FEE IS \$61.25

APPROVED
AND
FILED

97 JUL -1 PM 1:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N05990

1. Corporation Name

THE UNIVERSITY OF FLORIDA PLANT CITY GATOR CLUB, INC.

Principal Place of Business

Mailing Address

212 North Collins Street
Plant City, FL 33566

212 North Collins Street
Plant City, FL 33566

2. Principal Place of Business

2a. Mailing Address

21 212 North Collins Street
Suite, Apt. #, etc.

2a 212 North Collins Street
Suite, Apt. #, etc.

22 City & State

27 City & State

23 Plant City, FL

28 Plant City, FL

24 Zip

Country

25 Zip

Country

33566

25 Hillsborough

29 33566

30 Hillsborough

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified
11/02/1984

3a. Date of Last Report
04/15/96

4. FEI Number
59-2486361

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

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

Kenneth W. Buchman
212 North Collins Street
Plant City, FL 33566

81 Name

Kenneth W. Buchman

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

212 North Collins Street

83

00000228210--7

84 City

Plant City

FL

85 Zip Code

33566

10. Name and Address of New Registered Agent

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: Kenneth W. Buchman, Registered Agent

6/24/97

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

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P/D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Keel, Billy	
1.3 STREET ADDRESS	1705 Paddock Dr.	
1.4 CITY-ST-ZIP	Plant City, FL 33567	
2.1 TITLE	V/D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Knotts, Andy	
2.3 STREET ADDRESS	701 N. Warnell St.	
2.4 CITY-ST-ZIP	Plant City, FL 33566	
3.1 TITLE	V/D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Coton, Danny	
3.3 STREET ADDRESS	2888 Hammock Dr.	
3.4 CITY-ST-ZIP	Plant City, FL 33567	
4.1 TITLE	V/D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Harrell, Wayne	
4.3 STREET ADDRESS	4004 Concord Way	
4.4 CITY-ST-ZIP	Plant City, FL 33567	
5.1 TITLE	S/D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	Buchman, Kenneth W.	
5.3 STREET ADDRESS	212 North Collins St.	
5.4 CITY-ST-ZIP	Plant City, FL 33566	
6.1 TITLE	IPP/D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	Poppell, Mark	
6.3 STREET ADDRESS	503 W. Haines St.	
6.4 CITY-ST-ZIP	Plant City, FL 33566	

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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Kenneth W. Buchman

6/24/97

813-752-3172

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/96)



ACCOUNT NO. : 072100000032

REFERENCE : 448508 9510A

AUTHORIZATION : *Patricia Pysant*

COST LIMIT : \$ 61.25

ORDER DATE : July 1, 1997

ORDER TIME : 12:38 PM

ORDER NO. : 448508-010

CUSTOMER NO: 9510A

CUSTOMER: Kenneth Buchman, Esq
Kenneth W. Buchman, P.a.
212 North Collins Street

Plant City, FL 33566

ANNUAL REPORT FILING

NAME: THE UNIVERSITY OF FLORIDA
PLANT CITY GATOR CLUB, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Stephanie Stscherban

EXAMINER'S INITIALS:

A. alar
7/1/97

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97 JUL -1 PM 1:17
DIVISION OF CORPORATION