

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N14827 (2)

1. Corporation Name

MILTON SOCCER BOOSTER CLUB, INC.

Principal Place of Business

5175 HIDDENBROOK PL.
MILTON FL 32570
US

Mailing Address

5175 HIDDENBROOK PL.
MILTON FL 32570
US



3. Date Incorporated or Qualified
05/09/1986

3a. Date of Last Report
03/15/1995

2. Principal Place of Business

21 47 Star Hill Drive

2a. Mailing Address

26 47 Star Hill Drive

4. FEI Number
59-2701440

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

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

City & State

23 Milton, Florida

City & State

28 Milton, Florida

Zip Country
24 32570 25 USA

Zip Country
29 32570 30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

OTTLEY, KAY
5175 HIDDENBROOK PL.
MILTON FL 32570

81 Name
MARTHA SZYMONIAK

82 Street Address (P.O. Box Number is Not Acceptable)
47 Star Hill Drive

83

84 City
Milton

FL 85 Zip Code
32570

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

Martha Szymoniak

Martha Szymoniak

30 April 96

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

(NOTE: Registered Agent signature required when reissuing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME SANBORN, LINDA
STREET ADDRESS 5687 HAMILTON BRIDGE RD.
CITY-ST-ZIP MILTON FL ☐ DELETE

1.1 TITLE PD
1.2 NAME Sanborn, Linda
1.3 STREET ADDRESS 5687 Hamilton Bridge Road
1.4 CITY-ST-ZIP Milton, FL 32570 ☐ Change ☐ Addition

TITLE VD
NAME SANBORN, LINDA
STREET ADDRESS 5687 HAMILTON BRIDGE RD
CITY-ST-ZIP MILTON FL ☒ DELETE

2.1 TITLE VD
2.2 NAME Debbie Williams
2.3 STREET ADDRESS 328 Debbie Drive
2.4 CITY-ST-ZIP Milton, FL 32570 ☐ Change ☒ Addition

TITLE SD
NAME KASSINGER, MARGE
STREET ADDRESS 2026 PINE BLOSSOM RD
CITY-ST-ZIP MILTON FL ☒ DELETE

3.1 TITLE SD
3.2 NAME Patricia Holtman
3.3 STREET ADDRESS 5903 Pamela Drive
3.4 CITY-ST-ZIP Milton, FL 32570 ☐ Change ☒ Addition

TITLE D
NAME TYNES, LARRY
STREET ADDRESS 6454 ARINGWOOD DR.
CITY-ST-ZIP MILTON FL ☒ DELETE

4.1 TITLE TD
4.2 NAME Martha Szymoniak
4.3 STREET ADDRESS 47 Star Hill Drive
4.4 CITY-ST-ZIP Milton, FL 32570 ☐ Change ☒ Addition

TITLE TD
NAME OTTLEY, KAY
STREET ADDRESS 5175 HIDDENBROOK PL.
CITY-ST-ZIP MILTON FL ☒ DELETE

5.1 TITLE D
5.2 NAME Tamara Elrite
5.3 STREET ADDRESS 11351 Cross Street
5.4 CITY-ST-ZIP Milton, FL 32583 ☐ Change ☒ Addition

TITLE D
NAME GARNER, JOEL
STREET ADDRESS 8 ANDROMEDA DRIVE.
CITY-ST-ZIP MILTON FL 32530 ☒ DELETE

6.1 TITLE D
6.2 NAME Jennifer Hughes
6.3 STREET ADDRESS 6272 Jay's Way
6.4 CITY-ST-ZIP Milton, FL 32570 ☐ Change ☒ Addition

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 119.07(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 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 as an attachment with an address.

SIGNATURE:

Martha Szymoniak

Martha Szymoniak

30 April 96

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E037 (12/95)