


FILE NOW: FILING FEE IS \$61.25

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May 14 1997 8:00am  
Secretary of State

<b>NONPROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1997</b>		 <b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # N18025 (9)</b> 1. Corporation Name <b>TRINITY AQUATIC'S TEAM BOOSTER CLUB, INC.</b>			
Principal Place of Business <b>2525 CADY WAY</b> <b>WINTER PARK FL 32792</b> <b>US</b>		Mailing Address <b>2525 CADY WAY</b> <b>WINTER PARK FL 32792-4757</b> <b>US</b>	
<b>2. Principal Place of Business</b> <b>21</b> Suite, Apt. #, etc. <b>P.O. Box 4373</b> City & State <b>Winter Park, FL</b> Zip <b>32793</b> Country <b>U.S.A.</b>		<b>2a. Mailing Address</b> <b>26</b> Suite, Apt. #, etc. <b>P.O. Box 4373</b> City & State <b>Winter Park FL</b> Zip <b>32793</b> Country <b>U.S.A.</b>	
<b>9. Name and Address of Current Registered Agent</b> <b>PEAK, JOHN W</b> <b>8042 DUNSTABLE CIR</b> <b>ORLANDO FL 32817</b>		<b>10. Name and Address of New Registered Agent</b> <b>81 Name</b> <b>Raymond R. Arckey</b> <b>82 Street Address</b> <b>P.O. Box Number is Not Applicable</b> <b>150 Shell Point West</b> <b>83</b> <b>84 City</b> <b>Maitland</b> <b>FL</b> <b>85 Zip Code</b> <b>32751</b>	
<b>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 provisions of, Section 617.0503, Florida Statutes.</b> <b>SIGNATURE</b> <i>Raymond R. Arckey</i> <b>4/26/97</b> Signature, typed or printed name of registered agent, and title if applicable (NOTE: Registered Agent signature required when reinstating)			
<b>12. OFFICERS AND DIRECTORS</b>		<b>13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12</b>	
<b>TITLE</b> <b>DV</b> <input type="checkbox"/> DELETE <b>NAME</b> <b>MCCROAN, JAMES</b> <b>STREET ADDRESS</b> <b>1636 WOOD DUCK DRIVE</b> <b>CITY-ST-ZIP</b> <b>WINTER SPRINGS FL</b>	<b>1.1 TITLE</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition <b>1.2 NAME</b> <b>1.3 STREET ADDRESS</b> <b>1.4 CITY-ST-ZIP</b>	<b>2.1 TITLE</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>DT Raymond R. Arckey</b> <b>150 Shell Point West</b> <b>Maitland, FL 32751</b>	
<b>TITLE</b> <b>DS</b> <input checked="" type="checkbox"/> DELETE <b>NAME</b> <b>ELSTON, LYNN</b> <b>STREET ADDRESS</b> <b>1055 DEER RUN DEER RUN</b> <b>CITY-ST-ZIP</b> <b>WINTER SPRINGS FL</b>	<b>2.2 NAME</b> <b>2.3 STREET ADDRESS</b> <b>2.4 CITY-ST-ZIP</b>	<b>3.1 TITLE</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition <b>3.2 NAME</b> <b>3.3 STREET ADDRESS</b> <b>3.4 CITY-ST-ZIP</b>	
<b>TITLE</b> <b>DS</b> <input checked="" type="checkbox"/> DELETE <b>NAME</b> <b>EBERWEIN, DOUGLAS</b> <b>STREET ADDRESS</b> <b>1313 ANDES DRIVE</b> <b>CITY-ST-ZIP</b> <b>WINTER SPRINGS FL</b>	<b>4.1 TITLE</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition <b>4.2 NAME</b> <b>4.3 STREET ADDRESS</b> <b>4.4 CITY-ST-ZIP</b>	<b>5.1 TITLE</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition <b>5.2 NAME</b> <b>5.3 STREET ADDRESS</b> <b>5.4 CITY-ST-ZIP</b>	
<b>TITLE</b> <b>DP</b> <input type="checkbox"/> DELETE <b>NAME</b> <b>RHINE, ALAN</b> <b>STREET ADDRESS</b> <b>1578 EAGLE NEST CIRCLE</b> <b>CITY-ST-ZIP</b> <b>WINTER SPRINGS FL</b>	<b>6.1 TITLE</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition <b>6.2 NAME</b> <b>6.3 STREET ADDRESS</b> <b>6.4 CITY-ST-ZIP</b>	<b>7.1 TITLE</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition <b>7.2 NAME</b> <b>7.3 STREET ADDRESS</b> <b>7.4 CITY-ST-ZIP</b>	
<b>TITLE</b> <b>D</b> <input type="checkbox"/> DELETE <b>NAME</b> <b>HORNER, LARRY</b> <b>STREET ADDRESS</b> <b>337 RINGWOOD CR</b> <b>CITY-ST-ZIP</b> <b>WINTER SPRINGS FL</b>	<b>8.1 TITLE</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition <b>8.2 NAME</b> <b>8.3 STREET ADDRESS</b> <b>8.4 CITY-ST-ZIP</b>		
<b>TITLE</b> <b>D</b> <input type="checkbox"/> DELETE <b>NAME</b> <b>BLAIR, MICHAEL</b> <b>STREET ADDRESS</b> <b>1196 PERCH DR</b> <b>CITY-ST-ZIP</b> <b>ST. CLOUD FL</b>	<b>9.1 TITLE</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition <b>9.2 NAME</b> <b>9.3 STREET ADDRESS</b> <b>9.4 CITY-ST-ZIP</b>		



CR2E037 (9/96)

**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:** *Raymond R. Arckey* **4/26/97**