

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N23645 (7)

1. Corporation Name

BUCHHOLZ SOCCER BOOSTERS, INC.

Principal Place of Business

5510 NW 27TH AVENUE
GAINESVILLE FL 32606

Mailing Address

1227 NW 51ST TER
GAINESVILLE FL 32605



3. Date Incorporated or Qualified
11/30/1987

3a. Date of Last Report
06/15/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

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4. FEI Number

NOT APPLICABLE

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BOSTWICK, ROBERT
3452 NW 13TH AVE
GAINESVILLE FL 32605

81 Name **Melinda White**
82 Street Address (P.O. Box Number is Not Acceptable)
1227 NW 51st Ter
83 **S**
84 City **Gainesville** FL 85 Zip Code **32605**

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 617.0603, Florida Statutes.

SIGNATURE **Melinda C White Melinda C White treasurer 2/21/96**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **VD** ☒ DELETE
NAME **MOTT, CINDY**
STREET ADDRESS **1619 SW 77 TER**
CITY-ST-ZIP **GAINESVILLE FL 32607**

1.1 TITLE **PD** ☐ Change ☒ Addition
1.2 NAME **Cleve. Cooper**
1.3 STREET ADDRESS **5610 SW 88 Ct**
1.4 CITY-ST-ZIP **Gainesville FL 32608**

TITLE **TD** ☐ DELETE
NAME **WHITE, MELINDA**
STREET ADDRESS **1227 NW 51ST TER**
CITY-ST-ZIP **GAINESVILLE FL 32605**

2.1 TITLE **VD** ☐ Change ☒ Addition
2.2 NAME **George Fraggos**
2.3 STREET ADDRESS **2124 SW 75 Terr**
2.4 CITY-ST-ZIP **Gainesville FL 32607**

TITLE **SD** ☒ DELETE
NAME **RIORDAN, LAURIE**
STREET ADDRESS **7608 SW 6TH PL**
CITY-ST-ZIP **GAINESVILLE FL**

3.1 TITLE **VD** ☐ Change ☒ Addition
3.2 NAME **Marian Close**
3.3 STREET ADDRESS **8806 SW 42 Place**
3.4 CITY-ST-ZIP **Gainesville FL 32608**

TITLE **PD** ☒ DELETE
NAME **BOSTWICK, ROBERT**
STREET ADDRESS **3468 NW 11TH AV**
CITY-ST-ZIP **GAINESVILLE FL**

4.1 TITLE **SD** ☐ Change ☒ Addition
4.2 NAME **Debbie Martino**
4.3 STREET ADDRESS **11616 NW 8 Lane**
4.4 CITY-ST-ZIP **Gainesville FL 32606**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE **SD** ☐ Change ☒ Addition
5.2 NAME **Ed Swanson**
5.3 STREET ADDRESS **8108 NW 1 Place**
5.4 CITY-ST-ZIP **Gainesville FL 32607**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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)(x), 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: **Melinda C White Melinda C White 2/21/96**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)

3-15-1794