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Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # N26970 (6)

1. Corporation Name
BASEBALL CITY BOOSTER CLUB, INC.



Principal Place of Business: C/O MARCIA DEMPERIO, 14 SEMINOLE CT., WINTER HAVEN FL 33881 US

Mailing Address: C/O MARCIA DEMPERIO, 14 SEMINOLE CT., WINTER HAVEN FL 33881-9414 US

3. Date Incorporated or Qualified: 06/06/1988

3a. Date of Last Report: 02/09/1996

4. FEI Number: 59-2890865

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

2. Principal Place of Business (21) Suite, Apt. #, etc. (22) City & State (23) Zip (24) Country (25)

2a. Mailing Address (26) Suite, Apt. #, etc. (27) City & State (28) Zip (29) Country (30)

9. Name and Address of Current Registered Agent: BALUCH, MARY K., 180 GREENFIELD ROAD, WINTER HAVEN FL 33884

10. Name and Address of New Registered Agent: MARY K. BALUCH, 180 GREENFIELD RD., WINTER HAVEN FL 33884-1306

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: Mary K. Baluch MARY K. BALUCH DATE: 2-22-97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: D	NAME: DUBAY, JAMES E. STREET ADDRESS: 257 MENLO PARK AVE CITY-ST-ZIP: DAVENPORT FL	1.1 TITLE: PRESIDENT	1.2 NAME: DAVID ELDREDGE
TITLE: VD	NAME: BALUCH, ALEX STREET ADDRESS: 180 GREENFIELD RD. CITY-ST-ZIP: WINTER HAVEN FL	2.1 TITLE: Vice President	2.2 NAME: MARY K. BALUCH
TITLE: TD	NAME: LEE, JOE STREET ADDRESS: 233 MENLO PARK AVE CITY-ST-ZIP: DAVENPORT FL	3.1 TITLE: Treasurer	3.2 NAME: Joseph W. Lee
TITLE: SD	NAME: DEMPERIO, MARCIA STREET ADDRESS: 14 SEMINOLE CT. CITY-ST-ZIP: WINTER HAVEN FL	4.1 TITLE: Secretary	4.2 NAME: Marcia Demperio
TITLE: D	NAME: Earl Pritchard STREET ADDRESS: P.O. Box 158 N.A. CITY-ST-ZIP: Dundee, FL 33838	5.1 TITLE: EARL PRITCHARD	5.2 NAME: P.O. Box 158 NA
TITLE: D	NAME: Marlene Robinson STREET ADDRESS: 366 Jackson Park Ave. CITY-ST-ZIP: Davenport, FL 33837	6.1 TITLE: MARLENE ROBINSON	6.2 NAME: 366 JACKSON PARK AVE

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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. 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 of an attached report with an address.

SIGNATURE: Joseph W. Lee JOSEPH W. LEE DATE: 2/16/97 904-424-1449

CR2E037 (9/96)