

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

05 MAY - 1 AM 9:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N30843 (9)

1. Corporation Name:

THE FLORIDA COMMUNITY COLLEGE STATE BASKETBALL TOURNAMENT COMMITTEE, INC.

Principal Place of Business

Mailing Address

**1111 3RD AVE. W. SUITE 170
BRADENTON FL 34205**

**1111 3RD AVE. W. SUITE 170
BRADENTON FL 34205**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/23/1989

3a. Date of Last Report

05/01/1994

4. FEI Number

65-0204733

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**

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐

**\$68.75 Supplemental
Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

**KRAUSE PATRICA
8310 NW 7TH STREET
SUITE 47
MIAMI FL 34205**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE	CD
NAME	SWEAT, ROBERT (BOB)
STREET ADDRESS	3203 19TH AVE. W.
CITY, ST, ZIP	BRADENTON FL
TITLE	VCD
NAME	TALLEY, HARRY
STREET ADDRESS	1810 30TYH ST. W.
CITY, ST, ZIP	BRADENTON FL 34205
TITLE	SD
NAME	MCCOMAS, ROBERT (BOB)
STREET ADDRESS	3703 60TH ST. W.
CITY, ST, ZIP	BRADENTON FL 34209
TITLE	TD
NAME	WILSON, TEDD
STREET ADDRESS	3148 57TH AVE. CIR. E.
CITY, ST, ZIP	BRADENTON FL 34203
TITLE	D
NAME	MILLER, JOE
STREET ADDRESS	6609 27TH AVE. W.
CITY, ST, ZIP	BRADENTON FL 34209
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY, ST, ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY, ST, ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 119.07(3)(b), 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, and the person or persons 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 both, as applicable.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Type)

Signature (Typed Name)