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Mar 03 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # **N32197 (8)**
1. Corporation Name
POLICE ATHLETIC LEAGUE OF MANATEE COUNTY, INC.



Principal Place of Business
**1601 8TH AVE DRIVE WEST
BRADENTON FL 34206**

Mailing Address
**1601 8TH AVE DRIVE WEST
BRADENTON FL 34205-6722**

3. Date Incorporated or Qualified 05/09/1989	3a. Date of Last Report 08/05/1996
4. FEI Number 65-0122462	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 202 13th Avenue East Suite, Apt. #, etc.	2a. Mailing Address 26 202 13th Avenue East Suite, Apt. #, etc.
City & State 23 Bradenton, Florida 34208	City & State 28 Bradenton, Florida 34208
Zip 24 34208	Country 25 Manatee
Zip 29 34208	Country 30 Manatee

9. Name and Address of Current Registered Agent ROBINSON, LAYON F. II 442 OLD MAIN STREET BRADENTON 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	
		85 Zip Code	

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	C ROBINSON, LAYON F II 442 OLD MAIN STREET BRADENTON FL <input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V VANBUREN, DR. G 2703 19TH ST. CT. E. BRADENTON FL <input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T BROOKS, CHESTER 6404 MANATEE AVE. W., SUITE L BRADENTON FL <input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D RICHERT, TIM 4005 51ST ST E. BRADENTON FL <input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S FOSTER, BRENDA 202 13TH AVE E. BRADENTON FL <input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PRESHA, WALTER (P O BOX 106 N/A PARRISH FL <input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Chester R. Brooks, CPA* *2/20/97*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # **0061477**

CR2E037 (9/96)

Additional Officers

D
Deputy Cheif Watkins
1004 9th Avenue West
Bradenton, Florida 34205

D
Azell Johnson
P.O. Box 25015
Bradenton, Florida 34206

D
Beverly Hunter
202 13th Avenue East
Bradenton, Florida 34208