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NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N33317 (1)

1. Corporation Name

FORT LAUDERDALE HIGH SCHOOL ATHLETIC ASSOCIATION
INC.

Principal Place of Business

Mailing Address

FT. LAUDERDALE HIGH SCHOOL
1800 NE 4TH AVENUE
FT. LAUDERDALE FL 33306
US

CONNIE PRESCOTT
315 VICTORIA PARK RD.
FT. LAUDERDALE FL 33301-3767

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

9. Name and Address of Current Registered Agent

GUNDLACK, LANELLE
1349 MIDDLE RIVER DR.
FT. LAUDERDALE FL 33304

3. Date Incorporated or Qualified
07/12/1989

3a. Date of Last Report
12/09/1996

4. FEI Number

65-0151063

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

10. Name and Address of New Registered Agent

81 Name Gundlach, Lanelle W
82 Street Address (P.O. Box Number is Not Acceptable)
1349 Middle River Dr
83
84 City Ft Lauderdale FL 85 Zip Code 33304

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 Lanelle W. Gundlach

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

(NOTE: Registered Agent signature required when re-stating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME BENNETT, JACK
STREET ADDRESS 700 NE 20 ST.
CITY-ST-ZIP WILTON MANORS FL 33305

TITLE D
NAME WOLF, JAMES
STREET ADDRESS 2140 NE 14 AVE.
CITY-ST-ZIP WILTON MANORS FL

TITLE TD
NAME PRESCOTT, CONNIE
STREET ADDRESS 315 VICTORIA PARK RD.
CITY-ST-ZIP FT. LAUDERDALE FL 33301

TITLE D
NAME GUNDLACK, LANELLE
STREET ADDRESS 1349 MIDDLE RIVER DR.
CITY-ST-ZIP FT. LAUDERDALE FL 33304

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

REINSTATEMENT

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME Gundlach, Lanelle W.
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 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 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.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CR2E037 (9/96)