

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # N33668**

1. Corporation Name

**POLICE ATHLETIC LEAGUE OF SARASOTA COUNTY, INC.**

Principal Place of Business

2071 RINGLING BLVD  
SARASOTA FL 34237  
US

Mailing Address

ATT: FISCAL SERVICES  
P O BOX 4115  
SARASOTA FL 34230-4115  
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

08/11/1989

4. FEI Number

65-0154597

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

9. Name and Address of Current Registered Agent

ROSSI, RICHARD  
2071 RINGLING BLVD  
SARASOTA FL 34237

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 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

RICHARD ROSSI

04/23/99

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE  
NAME MONGE, GEOFFREY  
STREET ADDRESS 2071 RINGLING BLVD.  
CITY-STATE-ZIP SARASOTA FL

TITLE D ☐ DELETE  
NAME PUCCIO, ANTHONY  
STREET ADDRESS 1812 S OSPREY AVE  
CITY-STATE-ZIP SARASOTA FL 34239

TITLE T ☐ DELETE  
NAME DAVY, MARK  
STREET ADDRESS 1605 MAIN ST  
CITY-STATE-ZIP SARASOTA FL

TITLE S ☐ DELETE  
NAME LEWIS, TERRY  
STREET ADDRESS 2071 RINGLING BLVD  
CITY-STATE-ZIP SARASOTA FL

TITLE D ☐ DELETE  
NAME ROSSI, RICHARD  
STREET ADDRESS 2071 RINGLING BLVD  
CITY-STATE-ZIP SARASOTA FL 34237

TITLE V ☐ DELETE  
NAME SUPLEE, RAY  
STREET ADDRESS 800 S OSPREY AVE  
CITY-STATE-ZIP SARASOTA FL 34236

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-STATE-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-STATE-ZIP

3.1 TITLE V/D ☒ Change ☐ Addition  
3.2 NAME DAVY, MARK  
3.3 STREET ADDRESS 1605 MAIN ST  
3.4 CITY-STATE-ZIP SARASOTA FL

4.1 TITLE D ☒ Change ☐ Addition  
4.2 NAME LEWIS, TERRY  
4.3 STREET ADDRESS 2071 RINGLING BLVD  
4.4 CITY-STATE-ZIP SARASOTA FL

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-STATE-ZIP

6.1 TITLE P/D ☒ Change ☐ Addition  
6.2 NAME SUPLEE, RAY  
6.3 STREET ADDRESS 800 S OSPREY AVE  
6.4 CITY-STATE-ZIP SARASOTA FL 34236

14. I 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, with all other like empowered.

SIGNATURE:

SIGNATURE RECORDED  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/23/99 941-951-5929

Date

Daytime Phone #

CR2E037 (1/98)

0067264