FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

SIGNATURE: _

STAM W. STATH

	MENT # N3919 TEE COUNTY ATHLETIC FR	• •			
WALTER T	THE COOK I ATTLETIC P	OUNDATION, INC.		 	
Principal Place of Business Mailing Address					
1301 SIXTH AVE. W. SUITE 600 BRADENTON FL 34205		1301 SIXTH AVE. W. SUITE 600 BRADENTON FL 34205			
				3. Date Incorporated or Qualified 3a. 07/23/1990	Date of Last Report 06/28/1995
2. Principal P 21	lace of Business	2a. Mailing Address 26		4. FEI Number	Applied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		65-0208190	Not Applicable
22		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat 23	0	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	Zip	Country	8. This corporation has liability for intangible	Added to Fees
24	9. Name and Address of Currel	29 of Registered Agent	30	Florida Statutes	☑ No
		it riegistered Agent	81 Name	10. Name and Address of New Registers	d Agent
STATHIS, STAM W			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
1301 SIXTH AVE. W.				ess (.O. Box Number is Not Acceptable)	
SUITE 600 BRADENTON FL 34205			83		
DIVIDE	110N FE 34203		84 City		85 Zip Gode
11. Pursuant	to the provisions of Sections 617.0502	and 617.1508, Florida Statute	s, the above-named corpor	ration submits this statement for the purpose of c rd of directors. I hereby accept the appointment	Changing its registered office
familiar wi	th, and accept the obligations of, Sect	da. Such change was authorize ion 617.0503, Florida Statutes.	d by the corporation's boar	d of directors. I hereby accept the appointment	as registered agent. I am
SIGNATURE .	Street to the day				
12.	Signature, typed or printed name of registered agent OFFICERS AN		E: Rogistered Agent signature required 13.	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	UD OUD! OTO D
TITLE	PD	DELETE	1.1 TITLE	ADDITIONS/OF ANGES TO OFFICERS A	Change Addition
NAME	HALL, IRVING		1.2 NAME		
STREET ADDRESS	712 39TH STREET WEST		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	BRADENTON FL STD	DELETE	1.4 CITY-ST-ZIP		
NAME	STATHIS, STAM	□ nerere	2.1 TITLE		Change Addition
STREET ADDRESS	1301 SIXTH AVE. W. STE. 60	n	2.2 NAME 2.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON FL 34205	v	2.4 CITY-ST-ZIP		
TITLE	VD	DELETE	3.1 TITLE		Change Addition
NAME	NEWHALL, JOSEPH F		3.2 NAME		
STREET ADDRESS	6417 THIRLD AVE. W.		3.3 STREET ADDRESS		
CITY-ST-2IP TITLE	BRADENTON FL 34209	Filotogra	34. CITY-ST-ZIP		
NAME		DELETE	4.1 TITLE		☐ Change ☐ Addition
STREET ADDRESS			4. 2 NAME		
CITY-ST-ZIP			4.3 STREET ADDRESS		
TITLE		DELETE	4.4 CITY - ST - ZIP 51 TITLE		Change Addition
HAME			5.2 NAME		Change Addition
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP	**************************************		5.4 CITY - ST - ZIP		
ITLE		DELETE	6.1 TITLE		Change Addition
NAME			62 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
4. I do hereby	certify that the information supplied w	ith this filing is voluntarily furnish	6.4 CITY-ST-ZIP	r the exemption stated in Section 119.07(3)(k), Fi	
oath; that I	the information indicated on this annua am an officer or director of the corpor Block 12 or Block 13 if chapged, or or	ation or the receiver or tructon	mpoured to supplie the	r the exemption stated in Section 119.07(3)(k), FI e and that my signature shall have the same lega report as required by Chapter 617, Florida Statu	orida Statutes, I further il effect as if made under ites; and that my name

5/./96 (941) 747-4483