

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
May 21, 1999 8:00 am
Secretary of State

05-21-1999 90004 045 ****61.25

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DOCUMENT # N42942

1. Corporation Name

SKATERS ACTIVITY FUND EFFORT, INC.

Principal Place of Business

3419 BEECH TRAIL
CLEARWATER FL 33761

Mailing Address

3419 BEECH TRAIL
CLEARWATER FL 33761



2. Principal Place of Business

21 COUNTRY SIDE MALL

Suite, Apt. #, etc.

22 27001 US HWY 19

City & State

23 CLEARWATER FL

Zip

24 34621

Country

25 USA

2a. Mailing Address

26 P.O. Box 15025

Suite, Apt. #, etc.

27

City & State

28 CLEARWATER FL

Zip

29 33755-5025

Country

30 USA

3. Date Incorporated or Qualified

04/11/1991

4. FEI Number

59-3050938

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

CAMPANELLA, JENNIE
3419 BEECH TRAIL
CLEARWATER FL 33761

10. Name and Address of New Registered Agent

81 Name

SHARON COOK

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

3648 14 ST. N.

83

84 City

ST. PETERSBURG

FL

85 Zip Code

33704

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

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 DP ☒ DELETE

NAME CAMPANELLA, JENNIE

STREET ADDRESS 3419 BEECH TRAIL

CITY-ST-ZIP CLEARWATER FL 33761

TITLE VP ☒ DELETE

NAME MCAULIFFE, MARY

STREET ADDRESS 1795 SPRINGTIME AVENUE

CITY-ST-ZIP CLEARWATER FL 33755

TITLE DS ☒ DELETE

NAME CORDONNIER, MELANIE

STREET ADDRESS 2495 FRISCO DRIVE

CITY-ST-ZIP CLEARWATER FL 33761

TITLE DT ☐ DELETE

NAME BASTON, KIT

STREET ADDRESS 2772 KUMQUAT RD.

CITY-ST-ZIP CLEARWATER FL 33755

TITLE D ☒ DELETE

NAME VALLARELLI, PAT

STREET ADDRESS 2880-D GROVEWOOD BLVD.

CITY-ST-ZIP PALM HARBOR FL 34683

TITLE D ☒ DELETE

NAME TIGHE, SUSAN

STREET ADDRESS 1204 BROOK WAY

CITY-ST-ZIP SAFETY HARBOR FL 34695

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

DP

SHARON COOK

3648 14 ST. N.

ST. PETERSBURG FL 33704

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

DVP

DAN CARDINAL

6328 ARBOR DR

NEWPORT RIDGE FL 33455

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

DS

SHARON DUNCAN

4841 INVERNESS COURT #103

PALM HARBOR FL 34685

4.1 TITLE

4.2 NAME

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

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

REQUIRED

5/27/99

727-525-1866

CR2E037 (11/98)