

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

FILED
Sep 03 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N44594** (2)

1. Corporation Name

SEMINOLE BOOSTERS OF VOLUSIA COUNTY, INC.

Principal Place of Business

Mailing Address

213 SILVER BCH AVE
DAYTONA BEACH FL 32118
US

213 SILVER BEACH AVE
C/O GARY TINSLEY
DAYTONA BEACH FL 32118
US

3. Date Incorporated or Qualified

08/05/1991

4. FEI Number

59-3084115

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 **1309 WANDERING OAKS DR.**
Suite, Apt. #, etc.

26 **1309 WANDERING OAKS DR.**
Suite, Apt. #, etc.

City & State

23 **ORMOND BEACH FLA**

Zip
24 **32174**

Country
25 **USA**

City & State

28 **ORMOND BEACH FLA**

Zip
29 **32174**

Country
30 **USA**

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

TINSLEY, GARY W.
213 SILVER BCH AVE
DAYTONA BEACH FL 32118

10. Name and Address of New Registered Agent

81 Name

RAND, ERIC C

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

1309 WANDERING OAKS DRIVE

83

84 City

ORMOND BEACH

FL

85 Zip Code

32174

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.

ERIC C RAND TREASURER

8/27/98

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **DP** ☐ DELETE

NAME **RAND, ERIC**
STREET ADDRESS **1309 WANDERING OAK DR**
CITY-ST-ZIP **ORMOND BCH FL**

TITLE **DS** ☒ DELETE

NAME **TINSLEY, GARY W.**
STREET ADDRESS **109 MARBLED GODWIT CT**
CITY-ST-ZIP **DAYTONA BCH FL**

TITLE **DT** ☐ DELETE

NAME **TINSLEY, PATRICIA**
STREET ADDRESS **109 MARBLED GODWIT CT**
CITY-ST-ZIP **DAYTONA BEACH FL 32118**

TITLE **D** ☐ DELETE

NAME **RAND, HEIDI**
STREET ADDRESS **1309 WANDERING OAK DR**
CITY-ST-ZIP **ORMOND BEACH FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **DP** ☐ Change ☒ Addition

1.2 NAME **DAVISON, CHRIS**
1.3 STREET ADDRESS **150 BOUNTY LANE**
1.4 CITY-ST-ZIP **PONCE INLET FL 32127**

2.1 TITLE **DT** ☒ Change ☐ Addition

2.2 NAME **RAND, ERIC**
2.3 STREET ADDRESS **1309 WANDERING OAKS DR.**
2.4 CITY-ST-ZIP **ORMOND BEACH FL 32174**

3.1 TITLE **D** ☒ Change ☐ Addition

3.2 NAME **TINSLEY, PATRICIA**
3.3 STREET ADDRESS **109 MARBLED GODWIT COURT**
3.4 CITY-ST-ZIP **DAYTONA BEACH FL 32119**

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(l), 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:


SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ERIC C RAND

8/27/98

Date

904-253-1436

Daytime Phone #

CR2E037 (5/98)