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May 20 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N45109** (8)

1. Corporation Name

TAMPA BAY CHALLENGERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

11111 LAKE SASSA DR.
THONOTASASSA FL 33592

11111 LAKE SASSA DR.
THONOTASASSA FL 33592-2654



3. Date Incorporated or Qualified
09/12/1991

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

2a. Mailing Address

21 **804 Attache Ct**
Suite, Apt. #, etc.

26 **804 Attache Ct**
Suite, Apt. #, etc.

4. FEI Number
59-3083384

Applied For
☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

City & State

City & State

23 **TAMPA, FL**

28 **TAMPA, FL**

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

24 **33613**

Country

25 **HILLSBOROUGH**

Zip

29 **33613**

Country

30 **HILLSBOROUGH**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FILINGS, INC.
3732 N.W. 16TH STREET
FORT LAUDERDALE FL 33311

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D** ☒ DELETE
NAME **HALMARK, JACK**
STREET ADDRESS **7202 CENTER DR.**
CITY-ST-ZIP **TAMPA FL**

1.1 TITLE **President** ☒ Change ☐ Addition
1.2 NAME **Joe Lowery**
1.3 STREET ADDRESS **4502 W. 6th St.**
1.4 CITY-ST-ZIP **TAMPA, FL 33614**

TITLE **D** ☒ DELETE
NAME **IRIZARRY, GREG**
STREET ADDRESS **511 INNERGARY PL.**
CITY-ST-ZIP **VALRICO FL**

2.1 TITLE **V. President** ☒ Change ☐ Addition
2.2 NAME **Jim F. Polito**
2.3 STREET ADDRESS **9917 Cypress Shadow Ave.**
2.4 CITY-ST-ZIP **TAMPA, FL 33647**

TITLE **D** ☒ DELETE
NAME **SANDERS, DICK**
STREET ADDRESS **2912 RIPPLEWOOD DR.**
CITY-ST-ZIP **SEFFNER FL**

3.1 TITLE **Secretary** ☒ Change ☐ Addition
3.2 NAME **CINDY GREGORY**
3.3 STREET ADDRESS **804 Attache Ct**
3.4 CITY-ST-ZIP **TAMPA, FL 33613**

TITLE **D** ☒ DELETE
NAME **WALTER, DANNY**
STREET ADDRESS **11111 LAKE SASSA DR.**
CITY-ST-ZIP **THONOTASASSA FL**

4.1 TITLE **Treasurer** ☒ Change ☐ Addition
4.2 NAME **Debra deReus**
4.3 STREET ADDRESS **932 Hidden Dr.**
4.4 CITY-ST-ZIP **Lakeland, FL 33809**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE **D** ☒ Change ☐ Addition
5.2 NAME **Mary Dunkin**
5.3 STREET ADDRESS **4611 E Seneca Ave**
5.4 CITY-ST-ZIP **TAMPA FL 33617**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE **D** ☒ Change ☐ Addition
6.2 NAME **DEBBIE MEYERS**
6.3 STREET ADDRESS **P.O. Box 1781**
6.4 CITY-ST-ZIP **MARIANO FL 33660**

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.

SIGNATURE: **Debra deReus**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **May 13, 1997** (941) 859-7392
Daytime Phone # **0046632**

CR2E037 (9/96)