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Jul 11 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N46003 (2)

1. Corporation Name

ZEPHYRHILLS BULLDOGS BOOSTER CLUB, INC.

Principal Place of Business

Mailing Address

P.O. BOX 808
ZEPHYRHILLS FL 33539

P.O. BOX 808
ZEPHYRHILLS FL 33539-0808



3. Date incorporated or Qualified
11/14/1991

3a. Date of Last Report
07/16/1996

2. Principal Place of Business

2a. Mailing Address

21 6335 12TH STREET

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 ZEPHYRHILLS HIGH SCHOOL

27

City & State

City & State

23 ZEPHYRHILLS, FL.

28

Zip

Country

Zip

Country

24 33540

25

USA

29

30

4. FEI Number
NOT APPLICABLE

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

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

FRITZ, DAVID
5700 WEDGEFIELD DR
ZEPHYRHILLS FL 33541

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

DAVID T. FRITZ PRESIDENT/DIRECTOR

7/7/97

(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 PD
NAME FRITZ, DAVID
STREET ADDRESS 5700 WEDGEFIELD DR
CITY-ST-ZIP ZEPHYRHILLS FL 33541

DELETE

TITLE VPD
NAME EISENBROWN, DON
STREET ADDRESS 27364 GOLF COURSE LOOP
CITY-ST-ZIP WESLEY CHAPEL FL 33544

DELETE

TITLE TD
NAME SCHEUERMAN, BRUCE
STREET ADDRESS 38929 CAMBRIDGE DR.
CITY-ST-ZIP ZEPHYRHILLS FL 33540

DELETE

TITLE SD
NAME CLAUSNITZER, ELAINE
STREET ADDRESS 29316 LAUGHRIDGE PL
CITY-ST-ZIP WESLEY CHAPEL FL 33544

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

Change Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

Change Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

Change Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

Change Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

Change Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change Addition

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 DAVID T. FRITZ

CR2E037 (9/96)