

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

APPROVED
AND
FILED

CORPORATION
ANNUAL REPORT
1995



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

95 MAY 31 PM 1:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N47629 (3)

1. Corporation Name

PANTHER SOCCER BOOSTER CLUB, INC.

Principal Place of Business

Mailing Address

C/O LAMONT, NEIMAN & FEUERMAN, P.A.
TWO SOUTH BISCAYNE BLVD.
MIAMI FL 33131
US

C/O LAMONT, NEIMAN & FEUERMAN, P.A.
ONE BISCAYNE TOWER #3550
MIAMI FL 33131
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
02/28/1992	02/11/1994
4. FEI Number	Applied For
65-0317661	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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status	☒ \$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under C. 100.032, Florida Statutes	☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc

22 City & State

27 City & State

23 Zip

28 Zip

Country

24

25

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LAMONT, NEIMAN & FEUERMAN, P.A.
ONE BISCAYNE TOWER, SUITE 3550
TWO SOUTH BISCAYNE BLVD.
MIAMI FL 33131

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	11 TITLE	☐ Change ☐ Addition
NAME	BALTER, STEVEN	12 NAME	
STREET ADDRESS	15130 S.W. 76TH COURT	13 STREET ADDRESS	
CITY, ST, ZIP	MIAMI FL 33158	14 CITY, ST, ZIP	
TITLE	S	21 TITLE	☐ Change ☐ Addition
NAME	CREELMAN, PAULINE	22 NAME	
STREET ADDRESS	18024 S.W. 89TH PLACE	23 STREET ADDRESS	
CITY, ST, ZIP	MIAMI FL 33157	24 CITY, ST, ZIP	
TITLE	D	31 TITLE	☐ Change ☐ Addition
NAME	HOWARD, CLEVE W.	32 NAME	
STREET ADDRESS	7851 S.W. 137TH ST	33 STREET ADDRESS	
CITY, ST, ZIP	MIAMI FL	34 CITY, ST, ZIP	
TITLE	D	41 TITLE	☐ Change ☐ Addition
NAME	DUNPHY, JOEL M.	42 NAME	
STREET ADDRESS	8201 S.W. 162ND ST	43 STREET ADDRESS	
CITY, ST, ZIP	MIAMI FL	44 CITY, ST, ZIP	
TITLE	T	51 TITLE	☐ Change ☐ Addition
NAME	LAMONT, ROBERT S.	52 NAME	
STREET ADDRESS	ONE BISCAYNE TOWER #3550	53 STREET ADDRESS	
CITY, ST, ZIP	MIAMI FL	54 CITY, ST, ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY, ST, ZIP		64 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 within addition.

SIGNATURE:

Steven Balter
SIGNATURE AND TYPED OR PRINTED NAME OF CURRENT OFFICER OR DIRECTOR
STEVEN BALTER, PRESIDENT

5-4-95

305-530-9400

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