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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

DOCUMENT # N49089 (8)

1. Corporation Name

ZEPHYRHILLS YOUTH BASKETBALL LEAGUE, INC.

Principal Place of Business

38806 2ND AVE
ZEPHYRHILLS FL 33541
US

Mailing Address

PO BOX 17222
ZEPHYRHILLS FL 33539
US

3. Date Incorporated or Qualified
05/26/1992

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

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

4. FEI Number
59-3135443

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

MCALVANAH, THOMAS P.
37818 HWY. 54 WEST
ZEPHYRHILLS FL

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

TITLE DP ☐ DELETE
NAME SMITH CHRISTOPHER
STREET ADDRESS 38806 2ND AVE
CITY-ST-ZIP ZEPHYRHILLS FL

TITLE DV ☐ DELETE
NAME PLAMER, DALE
STREET ADDRESS 3929 PRETTY POND RD
CITY-ST-ZIP ZEPHYRHILLS FL

TITLE D ☐ DELETE
NAME BAHR, LENNY
STREET ADDRESS 10925 LINDA VISTA LANE
CITY-ST-ZIP DADE CITY FL

TITLE DS ☐ DELETE
NAME WIGGINS, LORI
STREET ADDRESS 5239 IXORA DR
CITY-ST-ZIP ZEPHYRHILLS FL

TITLE D ☐ DELETE
NAME SAYLOR, RICK
STREET ADDRESS 6335 12TH ST
CITY-ST-ZIP ZEPHYRHILLS FL

TITLE DT ☐ DELETE
NAME BAHR, TERENA
STREET ADDRESS 10925 LINDA VISTA LANE
CITY-ST-ZIP DADE CITY FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

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

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

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 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.

Dea. Sandra B. Mortham, Secretary of State, 510 2nd Floor, 1000

CR2E037 (9/96)