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**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N51291

1. Corporation Name

GREATER TAMPA YOUTH HOCKEY, INC.

Principal Place of Business

P.O. BOX 219
OLDSMAR FL 34677

Mailing Address

P.O. BOX 219
OLDSMAR FL 34677



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

10/09/1992

4. FEI Number

59-3184912

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

9. Name and Address of Current Registered Agent

ZOLKOWER, JAN
2471 EDNIAN TR. E.
PALM HARBOR FL 34683

10. Name and Address of New Registered Agent

81

Name

John F. Nelson

82

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

3077 Cascade Drive

83

Clearwater FL

84

City

FL

85

Zip Code

33761

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

John F. Nelson
Signature, typed or printed name of registered agent and title if applicable.

John F. Nelson

3-5-99

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☒ DELETE

NAME ZOLKOWER, JAN
STREET ADDRESS 2471 INDIAN TR. E.
CITY-ST-ZIP PALM HARBOR FL

TITLE D ☒ DELETE

NAME SANTA CRUZ, ROGUE D
STREET ADDRESS 420 EL GRECO DRIVE
CITY-ST-ZIP BRANDON FL

TITLE VD ☒ DELETE

NAME HOFFMAN, DIANA
STREET ADDRESS 2968 HEATHER TR
CITY-ST-ZIP CLEARWATER FL

TITLE TD ☒ DELETE

NAME ROEFARO, DENNIS
STREET ADDRESS 2564 CUMBERLAND TR
CITY-ST-ZIP CLEARWATER 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 President PD ☐ Change ☒ Addition

1.2 NAME John Nelson
1.3 STREET ADDRESS 3077 Cascade Dr.
1.4 CITY-ST-ZIP Clearwater, FL 33761

2.1 TITLE Vice President VD ☐ Change ☒ Addition

2.2 NAME Daniel Buble
2.3 STREET ADDRESS P.O. Box 272443
2.4 CITY-ST-ZIP Tampa, FL 33688

3.1 TITLE Treasurer TD ☐ Change ☒ Addition

3.2 NAME Theresa Mueller
3.3 STREET ADDRESS 262 Jean St.
3.4 CITY-ST-ZIP Palm Harbor FL 34683

4.1 TITLE Secretary SD ☐ Change ☒ Addition

4.2 NAME Lisa Cordner
4.3 STREET ADDRESS 2791 Delaney Ct.
4.4 CITY-ST-ZIP Palm Harbor, FL

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)(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, with all other like empowered.

SIGNATURE:

John F. Nelson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-1-99

DATE

727-725-0293

DAYTIME PHONE #

CR2E037 (11/98)