FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #
1. Corporation Name

N92000000830 (1)

T.S.H.S. CHEERLEADERS, INC.

FILED Aug 13 1998 8:00am Secretary of State

A KARAKNAK DEN INDIN MININ BAKMI AREM TREM BAKMI KORKA BRIDI MAKAN MAKAN MAMAN ARIM BAMI INDI

Principal Place of Business Mailing Address		A CODESTON BID LOUID SIGN DESTI GOING BRIST DOUG BRIST CORD SOFT GAIL SOFT			
1411 GULF RD. TARPON SPRINGS FL 34689 1411 GULF RD. TARPON SPRINGS FL 34689		3. Date Incorporated or Qualified 12/16/1992 4. FEI Number Applied For 59-3186656 Not Applicable			
2a. Mailing Ad	dress	5. Certificate of Status Desired \$8.75 Additional Fee Required			
Suite, Apt. #, etc. Suite, Apt. #, etc. 27		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
City & State City & State 28		7. Is this nonprofit corporation a homeowners association?			
Zip 29	Country 30	8. This corporation owes or has paid the ourrent year Intangible Personal Property Tax due June 30. Yes No			
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent			
	81 Name 82 Stree 83	e it Address (P.O. Box Number is Not Acceptable)			
	2a. Mailing Ad 2b. Suite, Apt. 27 City & Stat. 28 Zip.	1411 GULF RD. TARPON SPRINGS FL 34689 2a. Mailing Address 2b Suite, Apt. #, etc. 27 City & State 28 Zip Country 29 30 rrent Registered Agent 81 Name 82 Stree			

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.

84 City

SIGNATURE .	Signature, typed or printed name of registered agent and title if applications	ole (NOTE: A	egistered Agent signature	regulred when reinstating)	DATE	
12.	OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	DELETE	1.1 TITLE	PO	Change	Addition
NAME	FODOR, ANITA	•	1.2 NAME	Priva Renee		
STREET ADDRESS	451 OXFORD RD.		1.3 STREET ADDRESS	Baier, Renee		
CITY-ST-ZIP	PALM HARBOR FL		1.4 CITY - ST - ZiP		34689	
TITLE	VD	DELETE	2.1 TITLE	VO	KZ, Change	Addition
NAME	BANGOS, LINDA		2.2 NAME	Swan Frizzell		
STREET ADDRESS	1411 GULF RD.		2.3 STREET ADDRESS	run Gulf Rd		
CITY-ST-ZIP	TARPON SPRINGS FL 34689		2.4 CITY-ST-ZIP	Taroon Sorms F	L 34689	
TITLE	\$D	DELETE	3.1 TITLE	50	Change	Addition
NAME	WILLIAMS, DONNA		3.2 NAME	Terri Griffin		
STREET ADDRESS	1411 GULF RD		3.3 STREET ADDRESS	IUM GUIF Rd		
CITY-ST-ZIP	TARPON SPRINGS FL 34689		3.4. CITY-ST-ZIP	Tarpon Springs FL	34689	
TITLE	TD	DELETE	4.1 TITLE	70	Change	☐ Addition
NAME	HENDERSON, KEN		4. 2 NAME	Barban Kungth	\.	
STREET ADDRESS	1411 GULF RD.		4.3 STREET ADDRESS	1411 Gulf Rd		
CITY-ST-ZIP	PALM HARBOR FL 34889		4.4 CITY - ST - ZIP	Tarpon Springs FL	<i>3468</i> 4	
TIFLE	D	DEFELE	5.1 TITLE		Change	Addition
NAME	DEAL, DEIRDRE K.		5.2 NAME			
STREET ADDRESS	1411 GULF RD.		5.3 STREET ADDRESS			
CITY-ST-ZIP	TARPON SPRINGS FL		5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE	O	Change	Addition
NAME			6.2 NAME	Bruce Brotist		
STREET ADDRESS			6.3 STREET ADDRESS	1411 Golf Rd		
CITY-ST-7IP			6.4 CITY - ST - ZIP	Taran Sorman FL	3468 9	

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.

about the transfer of the A states

813 - 376-

Zip Code