

# FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # N93000000220 (4)

1. Corporation Name

BRANDON RAIDERS JUNIOR FOOTBALL, INC.



Principal Place of Business

10909 RIVERVIEW DR  
RIVERVIEW FL 33569  
US

Mailing Address

PO BOX 1679  
BRANDON FL 33509-1679  
US

3. Date Incorporated or Qualified  
01/19/1993

3a. Date of Last Report  
04/26/1995

2. Principal Place of Business

21 8623 Alafia Ridge Rd.

Suite, Apt. #, etc.

22

City & State

23 Riverview FL

Zip

24 33569

Country

25 U.S.

2a. Mailing Address

26 Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

4. FEI Number  
59-3164330

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

EVANS, WILLIAM  
10909 RIVERVIEW DR  
RIVERVIEW FL 33569

10. Name and Address of New Registered Agent

81 Name

EVANS, William

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

8623 Alafia Ridge Rd

83

84 City

Riverview

FL

85 Zip Code

33569

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

William Evans

(NOTE: Registered Agent signature required when reinstating)

DATE

5-20-96

12. OFFICERS AND DIRECTORS

TITLE

PTD

☐ DELETE

NAME

EVANS, WILLIAMS

STREET ADDRESS

11415 WINN RD.

CITY-ST-ZIP

RIVERVIEW FL

TITLE

VD

☐ DELETE

NAME

EVANS, BETTY

STREET ADDRESS

11415 WINN RD.

CITY-ST-ZIP

RIVERVIEW FL

TITLE

SD

☐ DELETE

NAME

CLARK, DONNA

STREET ADDRESS

2520 WASHINGTON BLVD.

CITY-ST-ZIP

VALRICO FL

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

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NAME

STREET ADDRESS

CITY-ST-ZIP

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

P.T.D.

1.2 NAME

EVANS, William

1.3 STREET ADDRESS

8623 Alafia Ridge Rd.

1.4 CITY-ST-ZIP

Riverview FL 33569

2.1 TITLE

VD

2.2 NAME

EVANS, BETTY

2.3 STREET ADDRESS

8623 Alafia Ridge Rd

2.4 CITY-ST-ZIP

Riverview FL 33569

3.1 TITLE

Clark, Donna

3.2 NAME

7901 S. STATE Rd 39

3.3 STREET ADDRESS

Plant City FL 33566

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 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 119.07(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 with an address.

SIGNATURE:

William Evans

Date

5-20-96 (813)677-0189

Daytime Phone #

CR2E037 (12/95)