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 #

N9300000317 (8)

1. Corporation Name						
THE FLAGLER COUNTY SHERIFF'S DEPARTMENT POLICE A THLETIC LEAGUE, INC.						
Principal Place of Business Me		Mailing Address			iait Mutet unium tilmt tiüti tüüt füßi	
1001 W MOODY BLVD BUNNELL FL 32110		P.O. BOX 350399 PALM COAST FL 32110 US		3. Date Incorporated or Qualified 01/25/1993	01/25/1993	
				4. FEI Number	Applied For	
6 6000000	0			59-3327023	Not Applicable	
2. Principal Place of Business 21		2a. Mailing Address 26		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		6. Election Campaign Financing	\$5.00 May Be	
City & State		27		Trust Fund Contribution	Added to Fees	
23		City & State		7. Is this nonprofit corporation a homeon Yes		
Zip	Country	Zip	Country	8. This corporation owes or has paid the		
24	26		30	Personal Property Tax due June 30.	Yes X No	
Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent						
POLICIA E THATTUV V						
Street Address				Address (P.O. Box Number is Not Acceptable)	×20	
25 FLORID PARK DRIVE PALM COAST FL 32137 83						
			84 City	21 0 4	85 Zip Code	
11 Pursuant to the provisions of Sections 617 0503 and 617 1508 Florido Statutos, the above comed expression as the file at the control of the sections of the section of the sections of the sections of the section of						
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 are firming with and accept the obligations of, Section 617.0503, Florida Statutes.						
1	TO THE STATE OF TH	Johnson Section 617.0505, Flori		10x Q.D. 4/27	198	
SIGNATURE .	Signature, typed or printed research register		Registered Agent signature		TE	
12.		S AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS		
TITLE	DP	DELETE	1.1 TITLE	p	Change Addition	
NAME	LOMBARDO, THOMAS		1.2 NAME	iari W. Spath 106 Breeze hill Lane		
STREET ADDRESS	44 WESTLEE LANE					
CITY-ST-ZIP	PALM COAST FL 32164 DED	T priere		Palm Coast , fl. 32137		
TITLE	APPERSON, DONALD	☐ DELETE	2.1 TITLE		Change Addition	
NAME ATTECT ADDRESS	4-B PROSPERITY LANE		2.2 NAME			
STREET ADDRESS	PALM COAST FL 32137		2.3 STREET ADDRESS			
CFTY-ST-ZIP TITLE	TALM CONDITE SEIST	▼ DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE	T - 0	Change Addition	
NAME	BOBACK, ROBYN	REAL OFFICE	3.2 NAME	Deluca Doris R. 45 Wedgewood Lane folm Coast, fl 32127	LES -colonides (**) Socialités	
STREET ADDRESS	13 BLACK OAK CT		3.3 STREET ADDRESS	45 Wedgewood Lane		
CITY-ST-ZIP	PALM COAST FL		3.4. CITY-ST-ZIP	Polm Coast Al 32127		
TITLE	DV	DELETE	4.1 TITLE	10111110031, 11 00 10 1	Change Addition	
NAME	NOCELLA, ROBERT	_	4.2 NAME			
STREET ADDRESS	16 WOODGUILD PLACE		4.3 STREET ADDRESS			
CITY-ST-ZIP	PALM COAST FL 32164		4.4 CITY - ST - ZIP			
TITLE	D	DELETE	5.1 TITLE		☐ Change ☐ Addition	
NAME	BOBACK, JOHN		52 NAME			
STREET ADDRESS	13 BLACK OAK COURT		5.3 STREET ADDRESS			
City-St-ZW	PALM COAST FL 32137		5.4 City-St-ZiP		,	
TITLE	T	DELETE		Secretary.	Change X Addition	
KAME	DELYCA, DORIS R	Incorrect	6.2 NAME	spath, Patricia		
STREET ADVOCESS	45 WEDGEWOOD LANE		A O STOREY ADDRESS	INI. Quedosahill Lane		

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.

SIGNATURE:

CITY-ST-ZIP

PALM COAST FL

CARL WILLEAD

Prosider

4-27-98

9044458924

FILED

May 11 1998 8:00am

Secretary of State