

FILE NOW: FILING FEE IS \$61.25

FILED
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
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DOCUMENT # N93000001428 (2)

1. Corporation Name

SEAHAWKS OF TAMPA BAY, INC.



Principal Place of Business	Mailing Address
COLEMAN JR. HIGH SCHOOL P.O. BOX 13284 TAMPA FL 33681-3284	COLEMAN JR. HIGH SCHOOL P.O. BOX 13284 TAMPA FL 33681-3284

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/26/1993		3a. Date of Last Report 03/04/1996	
21. Suite, Apt. #, etc.		26. Suite, Apt. #, etc.		4. FEI Number 59-3208265		Applied For Not Applicable	
22. City & State		27. City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23. Zip		28. Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24. Country		29. Country		30. Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
BOURASSA, DANIEL C JR. 3111 FIELDER AVE. TAMPA FL 33611				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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	<input type="checkbox"/> DELETE		1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BOURASSA, DANIEL C JR.			1.2 NAME			
STREET ADDRESS	3111 FIELDER AVE.			1.3 STREET ADDRESS			
CITY-ST-ZIP	TAMPA FL 33611			1.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	ELLINGWOOD, BILL			2.2 NAME			
STREET ADDRESS	4431 LEILA AVE.			2.3 STREET ADDRESS			
CITY-ST-ZIP	TAMPA FL 33616			2.4 CITY-ST-ZIP			
TITLE	S	<input type="checkbox"/> DELETE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BURTON, TAMMI			3.2 NAME			
STREET ADDRESS	3416 PAXTON AVE			3.3 STREET ADDRESS			
CITY-ST-ZIP	TAMPA FL 33611			3.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	SHULIS, TRACY W			4.2 NAME			
STREET ADDRESS	4806 CULBREATH ISLES WAY			4.3 STREET ADDRESS			
CITY-ST-ZIP	TAMPA FL 33629			4.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	DOSAL, MARK			5.2 NAME			
STREET ADDRESS	4217 MORRISON			5.3 STREET ADDRESS			
CITY-ST-ZIP	TAMPA FL 33611			5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				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, changed, or on an attachment with an address.

SIGNATURE: *[Signature]* 5/13/97

CR2E037 (9/96)