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Mar 16 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # N93000001876 (2)

1. Corporation Name

SEMINOLE COUNTY POLICE ATHLETIC LEAGUE, INC.



Principal Place of Business

Mailing Address

SEMINOLE COUNTY SHERIFF OFFICE
SANFORD FL

1345 28TH ST
SANFORD FL 32773

3. Date Incorporated or Qualified

04/23/1993

4. FEI Number

59-3196445

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current 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

JUDE, CHINA L
1345 28TH STREET
SANFORD FL 32773

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

China L Jude

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3-5-98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE EPD
NAME MEDLEY, DAVID
STREET ADDRESS 581 NEW ENGLAND CT #103
CITY-ST-ZIP ALTAMONTE SPRINGS FL ☒ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VD
NAME MONTGOMERY, ROBERT
STREET ADDRESS 3780 WATERCREST DRIVE
CITY-ST-ZIP LONGWOOD FL ☐ DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE TD
NAME PETERS, MARGARET
STREET ADDRESS 345 FOREST WAY CIRCLE, # 104
CITY-ST-ZIP ALTAMONTE SPRINGS FL ☒ DELETE

3.1 TITLE Treasurer
3.2 NAME Willie Chandler
3.3 STREET ADDRESS 1345 28th Street
3.4 CITY-ST-ZIP Sanford, FL 32773 ☐ Change ☒ Addition

TITLE SD
NAME STEWART, FRANCIS M
STREET ADDRESS 1345 28TH ST
CITY-ST-ZIP SANFORD FL ☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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:

Sandra B. Mortham / JUDGE 3-5-98 402-330-1000

CR2E037 (1097)