FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999

DOCUMENT # N9300001894

INTERNATIONAL SWIMMING HALL OF FAME SPECIAL EVEN TS, INC.

Principal Place of Business ONE HALL OF FAME DR. FORT LAUDERDALE FL 33316

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Mailing Address

2a. Mailing Address

City & State

Suite, Apt. #, etc.

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ONE HALL OF FAME DR. FORT LAUDERDALE FL 33316-

Apr 26, 1999 8:00 am § Secretary of State

04-26-1999 90075 013 ****61.25

4 2934 - 90075 - 13



 \Box .

Applied For

\$8.75 Additional

Fee Required

Not Applicable

3. Date Incorporated or Qualifed

5. Certifcate of Status Desired

04/28/1993

65-0491534

4. FEI Number

9. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent 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 agent, or both, in the State of Florida. Such change was authority by the 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 authority by the 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 authority by the corporation to board of directors, I hereby accept the appointment as registered segment, and accept the obligations of, Section 617,0503, Florida Statutes. SIGNATURE SQUALITY TO ADDITIONAL THE STATE AGENCY AND DIRECTORS IN 12 TITLE OFFICIENT AND DIRECTORS IN 12 TITLE	Zip	Country	Zip	Countr	y	6. Election Campaign Financi	ing 👝	\$5.00 May Be	
CT CORPORATION SYSTEM 120 SOUTH PINE ISLAND RD. PLANTATION FL 33324 11. Pursuant to the provisions of Sections 517,0502 and 617,1508, Florida Statutes, the above-hamed corporation submits this statement for the purpose of changing its registered agent, and familiar with, and accept the obligations of, Section 617,0502, Florida Statutes, the above-hamed 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 submitsed by the corporation's board of directors. I hereby accept the appointment as registered agent, and the provisions of, Section 617,0502, Florida Statutes, the above-hamed corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617,0502, Florida Statutes, the above-hamed corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617,0502, Florida Statutes, the above-hamed corporation is statement for the purpose of changing its registered office or registered agent. I am familiar with, and accept the obligations of, Section 617,0502, Florida Statutes, the above-hamed corporation's board of directors. I hereby accept the appointment as registered agent. SIGNATURE Signature, types of printed search of pictors and the inspirations. In the corporation's board of directors. I hereby accept the appointment as registered agent. ANDE TO THE TOWNS OF THE ACCEPTANCE OF THE ACCE	24	25	29 3	0		Trust Fund Contribution	LJ		
CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION FL 33324 44 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 617 (5002 and 617 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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 and succept the obligations of, Section 617 (5003, Florida Statutes.) SIGNATURE Signature Upon Company of Provide Ammed Implications of, Section 617 (5003, Florida Statutes.) SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 11. ITIME 12. Change Addition 12. ITIME 12.	1.		Registered Agent			10. Name and Address of Ne	w Registered	Agent	
1200 SOUTH PINE ISLAND RD. PLANTATION FL 33324 44 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 agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent large accept the suppointment as registered agent and as accept the obligations of, Section 617,0503, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE D FREAS, SAMUEL J OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 WWE FREAS, SAMUEL J 12. TITLE D Change Addition FREAS, SAMUEL J 12. LAUDERDALE FL 33316 TO Change Addition FREAS, SAMUEL J ONE HALL OF FAME DR. 13. SIREET ADDRESS ONE HALL OF FAME DR. 22. NAWE MARWIN, STUART 33. SIREET ADDRESS ONE HALL OF FAME DR. 33. SIREET ADDRESS ONE HALL OF FAME DR. 34. STREET ADDRESS ONE HALL OF FAME DR. 35. STREET ADDRESS ONE HALL OF FAME DR. 35. STREET ADDRESS ONE HALL OF FAME DR. 35. STREET ADDRESS ONE HALL OF FAME DR. 44. GITY-ST-ZP TITLE Change Addition Ch	•			8.	1 Name				
12.00 SOUTH PINE ISLAND RD. PLANTATION FL 33324 4 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Floridal 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, Floridal Statutes SIGNATURE Signature, typed of period name of registered agent and tise if applicable. (NOTE Registered Agent ingritume required when refinatating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PREAS, SAMUEL J ONE HALL OF FAME DR. 13. SIRECT AGRESS ONE HALL OF FAME DR. 14. CITY-ST-2P TI. LAUDERDALE FL 33316 DELETE 13. TITLE Change Addition Addition Addition Addition Change Ad	CT CORPORATION SYSTEM			. 8	2 Street Add	ress (P.O. Box Number is Not Acc	entable)		
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11. Pursuant to the provisions of Sections 817.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered segment. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed of printed name of insplaned agent and dis if applicable. OFFICERS AND DIRECTORS TITLE OFFICERS AND DIRECTORS DELETE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS ONE HALL OF FAME DR. TI. LAUDERDALE FL 33316 DELETE 2.1 TITLE 2.2 NAME 1.3 STREET ADDRESS DR. LAUDERDALE FL 33316 DELETE 2.1 TITLE 2.2 NAME 3.3 NAME ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.2 NAME 1.3 STREET ADDRESS TI. LAUDERDALE FL 33316 DELETE 2.1 TITLE 1.2 NAME 3.3 NAME ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.2 NAME 1.3 STREET ADDRESS TI. LAUDERDALE FL 33316 DELETE 2.1 TITLE 1.2 NAME 3.3 STREET ADDRESS TI. LAUDERDALE FL 33316 DELETE 3.1 STREET ADDRESS TI. LAUDERDALE FL 33316 DELETE 4.1 STREET ADDRESS TITLE Change Addition Addition STREET ADDRESS TITLE Change Addition TITLE TITL	I WITH HOUSE			-	4 City			es Zin C	nde
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Signature, typind or printed name of registered agent and time if apprication. NOTE Registered Agent agent under indicating) NOTE Registered Agent agent under indicating in the process of the proces	office or n	egistered agent, or both, in the State o	f Florida. Such change was aut	horized b	v the corporati	poration submits this statement for on's board of directors. I hereby a	the purpose o ccept the appo	f changing its r intment as regi	egistered istered
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14. I hereby conting that the information supplied with this filing does not qualify for the exemption stated in Section 119 (7/3)(i) Florida Statutes. I further certify that the information	CITY-ST-ZIP	·				•			
indicated on this annual report or suppliemental 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	14. I hereby o	certify that the information supplied with	this filing does not qualify for the	he exemp	tion stated in	Section 119.07(3)(i), Florida Statut	es. I further ce	rtify that the in	formation am an