

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
 AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # N93000003737 (4)

1. Corporation Name

RICKARD MIDDLE SCHOOL BOOSTERS' CLUB, INC.



Principal Place of Business

Mailing Address

RICKARD MIDDLE SCHOOL
 6000 NE 9TH AVE
 OAKLAND PARK FL 33334

RICKARD MIDDLE SCHOOL
 6000 NE 9TH AVE
 OAKLAND PARK FL 33334

3. Date Incorporated or Qualified
 08/18/1993

3a. Date of Last Report
 02/09/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

4. FEI Number
 65-0441303

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

10. Name and Address of New Registered Agent

WATTS, JEAN
 RICKARD MIDDLE SCHOOL
 6000 NE 9TH AVE
 OAKLAND PARK FL 33334

81 Name GARY L. WENGER

82 Street Address (P.O. Box Number is Not Acceptable)
 4723 NE 17TH TERR.

83 OAKLAND PARK, FL.

84 City

FL

85 Zip Code

33334

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 X GARY L. WENGER

(NOTE: Registered Agent signature required when reinstating)

6/12/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P DELETE

NAME SCHARF, ANN
 STREET ADDRESS 1581 NE 47TH CT
 CITY-ST-ZIP OAKLAND PARK FL 33334

1.1 TITLE Change Addition

TITLE V DELETE

NAME WENGER, GARY L
 STREET ADDRESS 4723 NE 17TH TERR
 CITY-ST-ZIP OAKLAND PARK FL 33334

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP Change Addition

TITLE ST DELETE

NAME GELARDI, KULANI
 STREET ADDRESS 4704 NE 17TH AVE
 CITY-ST-ZIP OAKLAND PARK FL 33334

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP Change Addition

TITLE D DELETE

NAME WENGER, LINDA
 STREET ADDRESS 4723 NE 17TH TERR
 CITY-ST-ZIP OAKLAND PARK FL 33334

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP Change Addition

TITLE D DELETE

NAME SCHARF, DAVE
 STREET ADDRESS 1581 NE 47TH CT
 CITY-ST-ZIP OAKLAND PARK FL 33334

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP Change Addition

TITLE D DELETE

NAME GELARDI, JOHN
 STREET ADDRESS 4704 NE 17TH AVE
 CITY-ST-ZIP OAKLAND PARK FL 33334

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP Change Addition

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, 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: GARY L. WENGER

6/12/96

(954) 771-8441

Daytime Phone #

0000688

CR2E037 (3/96)