

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 # N93000004201 (0)

1. Corporation Name

INTER-COUNTY BASKETBALL ASSOCIATION, INC.



Principal Place of Business

1817 SENECA BOULEVARD
WINTER SPRINGS FL 32708

Mailing Address

1817 SENECA BOULEVARD
WINTER SPRINGS FL 32708

3. Date Incorporated or Qualified
09/13/1993

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

21 818 Lullwater DR

2a. Mailing Address

26 818 Lullwater DR

4. FEI Number
59-3203155

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

City & State

23 Oviedo, FL

City & State

28 Oviedo

Zip

24 32765

Country

25 Seminole

Zip

29 32765

Country

30 Seminole

9. Name and Address of Current Registered Agent

JOHNSON, RONALD
1817 SENECA BOULEVARD
WINTER SPRINGS FL 32708

10. Name and Address of New Registered Agent

81 Name Thomas M. HARGRAVE

82 Street Address (P.O. Box Number is Not Acceptable)

818 Lullwater DR.

84 City Oviedo

FL

85 Zip Code

32765

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P DELETE

NAME JOHNSON, RONALD
STREET ADDRESS 1817 SENECA BLVD
CITY-ST-ZIP WINTER SPRINGS FL

TITLE VP DELETE

NAME BROZZO, NANETTE
STREET ADDRESS 2457 SOUTHERN HILLS CT
CITY-ST-ZIP OVIEDO FL

TITLE D DELETE

NAME HARGRAVE, TOM
STREET ADDRESS 818 LULLWATER DR
CITY-ST-ZIP OVIEDO FL

TITLE D DELETE

NAME JUTTLESTAD, ERIC
STREET ADDRESS 31 SWEETWATER CR
CITY-ST-ZIP OVIEDO FL

TITLE D DELETE

NAME BONACCI, MIKE
STREET ADDRESS 537 PINESONG DR
CITY-ST-ZIP CASSLEBERRY FL

TITLE D DELETE

NAME BLAKE, JOHN
STREET ADDRESS 665 WHITE OAK CT
CITY-ST-ZIP WINTER SPRINGS FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President Thomas M. HARGRAVE Change Addition

1.2 NAME 818 Lullwater DR.

1.3 STREET ADDRESS Oviedo, FL. 32765

1.4 CITY-ST-ZIP Change Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE Director Johnson, Ronald Change Addition

3.2 NAME 1817 SENECA BLVD

3.3 STREET ADDRESS WINTER SPRINGS, FL. 32708

3.4 CITY-ST-ZIP Change Addition

4.1 TITLE D

4.2 NAME Bob Bowman

4.3 STREET ADDRESS 1024 Providence Ln.

4.4 CITY-ST-ZIP Oviedo, FL 32765

5.1 TITLE D

5.2 NAME D'Lee Hancock

5.3 STREET ADDRESS 111 Aulin Ave

5.4 CITY-ST-ZIP Oviedo, FL 32765

6.1 TITLE D

6.2 NAME Bob Danner

6.3 STREET ADDRESS 1550 Rochelle Ln.

6.4 CITY-ST-ZIP Oviedo, FL 32765

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

0003431

CR2E037 (3/96)