## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1006

|   | 1996   | DIVISION OF CO                       | PRPORATIONS                                    |  |   |
|---|--|--------------------------------------|--|--|---|
| 1. Corporation  | MENT # N9300<br>ER CITY HIGH SCHOOL BA             | 0004615 (1)                          | TIO  |  |   |
| N, INC  |  | AND FANERIS MOSOCIA                  | illo   | I IEDRARI DID IBIDD IIIII ROMI DAMA D  | I BININ BERNA BERNA BIRNE BINAN NABA BININ HEBI                             |
|   |  |                                      |  |  |   |
| Principal Plac  |  | Mailing Address                      |  |  |   |
| 9401 STIRLING RD 9401 STIRLING RD COOPER CITY FL 33328 COOPER CITY FL 33328 |  |                                      |  |  |   |
| 000, 61, 011  | 1 1 2 00020  | OOOFEN OUT TE \$5320                 |  |  |   |
|   |  |                                      |  | 3. Date Incorporated or Qualified 10/13/1993   | 3a. Date of Last Report<br>05/01/1995                                       |
| 2. Principal P  | Place of Business                                  | 2a. Mailing Address                  |  | 4. FEI Number<br>59-2583208  | Applied For   |
| Suite, Apt.   | #, etc.  | Suite, Apt. #, etc.                  | <u>", , , , , , , , , , , , , , , , , , , </u> |  | Not Applicable  \$8.75 Additional   |
| 22  |  | 27                                   |  | 5. Certificate of Status Desired   | Fee Required  |
| City & Stat   | te   | City & State                         |  | Election Campaign Financing     Trust Fund Contribution                                  | \$5.00 May Be<br>Added to Fees  |
| Zip   | Country  | Zip                                  | Country  | 8. This corporation has liability for in   |   |
| 24  | 25   |                                      | 0  |  | Yes No  |
| <u></u>   | 9. Name and Address of Curre                       | nt Registered Agent                  | 81 Name  | 10. Name and Address of New Re   | <u> </u>  |
| LAROUGH NORMAN  |  |                                      |  | DFELTER, TER   | .BY   |
| 9401 STIRLING RD  |  |                                      | 82 Street Add                                  | ress (P.O. Box Number is Not Acceptable  | ® RD  |
| COOPER CITY FL 33328  |  |                                      |  |  |   |
|   |  |                                      | 84 City _                                      |  | B5 Zip Code   |
| 44 Discound   | to the previous of Castions 617.050                | O and 617 1500 Finde Ctature         | 84 City COOF                                   | ER CITY  | - FL     \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\                                   |
| I or registe  | ared agent, or both, in the State of Flor          | rida. Such change was authorized l   | on the corporation's boa                       | ration submits this statement for the purp<br>ard of directors. I hereby accept the appo | pose of changing its registered office<br>intment as registered agent. I am |
| l   | ith, and accept the obligations of Sec             | tion 617.0503, Florida Statutes.     | 01.  | Da . D O L   | Machon  |
| SIGNATURE   | Signature, typed or ginted name of registered ager | nt and title if applicable. (NOTE: F | Registered Agent signature require             |  | DATE DATE   |
| 12.   | OFFICERS AN  | ND DIRECTORS  DELETE                 | 13. //   | ADDITIONS/CHANGES TO OFFICE  |   |
| NAME  | BANER, WILLIAM                                     | Proceed                              |  | PP<br>ICCARD, JODY   | Change Addition   |
| STREET ADDRESS  | 9401 STIRLING RD                                   |                                      | 1.3 STREET ADDRESS                             | 401 STIRLING RD  |   |
| CITY-ST-ZIP   | COOPER CITY FL                                     |                                      |  |  | 33328   |
| TITLE   | VPD  | DELETE                               | 2.1 TITLE                                      | PD   | Change 🔂 Addition   |
| NAME  | MCCARD, JODY<br>9401 STIRLING RD                   |                                      | 2.2 NAME                                       | SRUDNELL, MARK   |   |
| STREET ADDRESS  | COOPER CITY FL                                     |                                      |  | 401 STIRLING RD  | つつりかめ   |
| CITY-ST-ZIP<br>TITLE  | TD   | DELETE                               | 2. 4 CITY-ST-ZIP C 3.1 TITLE                   | OPER CITY, FL  | 33328<br>□ Change X Addition  |
| NAME  | LABUSH, NORMAN                                     | 7                                    |  | ORRY WITCHER   | <b>/</b>  |
| STREET ADDRESS  | 9401 STIRLING ROAD                                 |                                      | 3.3 STREET ADDRESS                             | 401 STIRLING A   | LD.   |
| CITY-ST-ZIP   | COOPER CITY FL                                     |                                      | 3.4. CITY-ST-ZIP C                             | 401 STIRLING A<br>COPER, CITY, FL3   | 3328  |
| TITLE   | S<br>Brudnell, Karen                               | DEFELE                               | 4.1 TITLE                                      | •  | Change Addition   |
| NAME<br>STREET ADDRESS  | 9401 STIRLING ROAD                                 |                                      | 4. 2 NAME<br>4.3 STREET ADDRESS                |  |   |
| CITY-ST-ZIP   | COOPER CITY FL                                     |                                      | 4.4 CITY-ST-ZIP                                |  |   |
| TITLE   | 0  | DELETE                               | 5.1 TITLE                                      |  | Change Addition   |
| NAME  | GLADFELTER, TERRY                                  |                                      | 5.2 NAME                                       |  |   |
| STREET ADDRESS  | 9401 STIRLING RD                                   |                                      | 5.3 STREET ADDRESS                             |  |   |
| CITY-ST-ZIP   | COOPER CITY FL                                     | C DELETE                             | 5.4 CITY - ST - 2IP                            |  | []Ab [] 4.100   |
| NAME  | 1  | DELETE                               | 6.1 TITLE                                      |  | Change Addition   |
|   |  |                                      |  |  |   |
| STREET ADDRESS  |  |                                      | 6.2 NAME<br>6.3 STREET ADDRESS                 |  |   |

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 13 if changed, or on an attachment with an address.

6.4 CITY - ST - ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND THE POR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

4/26/96

Daytime Phone #

CR2E037 (12/95)