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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # N9300005364 (5)

FLYING L SCIENCE BOOSTER CLUB, INC.

Principal Place	of Business	Mailing Address					1611: 60:11 A0101 A11.)	1881	
FT. LAUDERDALE HIGH SCHOOL 1600 NE 4TH AVE. FT. LAUDERDALE FL 33305		FT. LAUDERDALE HIGH SCHOOL 1600 NE 4TH AVE.								
ri. LAUUEHUI	ALE FL 33305	FT. LAUDERDALE FL 33	s s c5			3. Date Incorporated or Qualified 11/19/1993		Last Report 6/1995		
2. Principal Pla	ace of Business	2a. Mailing Address 26				4. FEI Number 65-0451318	Applied For Not Applicable			
Suite, Apt. /	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	□ \$	B.75 Addition Fee Required		
City & State		City & State				6. Election Campaign Financing		5.00 May E		
23		28				Trust Fund Contribution				
Zip	Country						has liability for intangible tax under s. 199.032,			
24	25	29	30			Florida Statutes				
	9. Name and Address of Current	Registered Agent		81	Nessa	10. Name and Address of New R	egistered Ager	<u>it</u>		
				ا'°	Name					
MICHALA 812 NW :	IK, MARY A		•	82	Street A	Address (P.O. Box Number is Not Acceptab	e)			
	MANORS FL 33311		83							
MILION	MANURS PL 33311									
				84	City		FL 85	Zip Code	Ì	
or register	to the provisions of Sections 617.0502 ed agent, or both, in the State of Florid th, and accept the obligations of, Section	a. Such change was authoriz	ed by the c	ve-n	amed co pration's l	rporation submits this statement for the pur board of directors. I hereby accept the appo	pose of changin	g its registered stered agent. I	d office am	
SIGNATURE _										
	Signature, typed or printed name of registered agent a OFFICERS AND		OTE: Registered	Agen I	signature re	quired when reinstating) ADDITIONS/CHANGES TO OFF	DATE CERS AND DIR	ECTORS IN 1'	, 	
12.	D OFFICERS AND	DELETE	1170	TI F		ADDITIONATOR PANGES TO OTT			-	
NAME	MICHALAK, MARY A			1 2 NAME			<u>.</u>			
STREET ADDRESS	812 NW 28TH CT			1.3 STREET ADORESS						
CITY-ST-ZIP	WILTON MANORS FL			TY-S1	1					
TITLE	DV DELETE			ILF			[☐ Cr	iange 🔲 Add	dition	
NAME	Tobias, Karen	2 2 NA	ME							
STREET ADDRESS	2725 NE 6TH AVE		. 2 3 STREET ADDRESS							
CITY - ST - ZIP	FT. LAUDERDALE FL 33334-25	556	2 4 City-St-2							
TITLE	Ď	DELETE	3.1 TITLE				☐ Ct	iange 🔲 Add	dition	
NAME	DUNCKEL, ROBERT B		3 2 NAME							
STREET ADDRESS	2464 NE 27TH AVE.		3.3 ST	REET	ADORESS					
CITY - ST - ZIP	FT. LAUDERDALE FL 33305		34 C	ITY-S	I - ZIP					
TITLE	D	DELETE	4.1 1				□ Ci	iange 🔲 Add	dit-on	
NAME	CARUSO, SUSAN		4. 2 N							
STREET ADDRESS	2741 NE 6TH AVE.				ADDRESS					
CITY-ST-ZIP	FT. LAUDERDALE FL 33334-25	DELETE	4.4 CI		r - ZIP	DT	₽ cı	nange 🔲 Add	Idition	
TITLE	DT Zemina Martin		5 1 TI			SEMILIA MAGIAN	(ES) CI	ange [_] Aut	ultion	
NAME	269 NW 92ND AVE		5 2 N/			ZEMINA, MARIAN				
STREET ADDRESS	PLANTATION FL 33324				ADDRESS		323			
CITY-ST-ZIP TITLE	D D D	DELETE	54 CI		1 · ZIP	INKNIMITON (1. 33		nange	dition	
	MICHALAK, MARY ANN			6 1 TITLE 6 2 NAME			<u>. </u>			
NAME STOCET ATTORESS	812 NW 28TH CT		6.3 STREET ADDRESS		#UUBESS					
STREET ADORESS	WILTON MANORS FL		6 4 CI		i					
CITY-ST-ZIP 14. I do hereb	ov certify that the information supplied v	vith this filing is voluntarily furr	nished and	does	not qua	lify for the exemption stated in Section 119	07(3)(k), Florida	Statutes. I furt	:her	
certify that oath; that	t the information indicated on this annu	ial report or supplemental and ration or the receiver or truste	nual report i ee empowe	s tru	e and ac	curate and that my signature shall have the e this report as required by Chapter 617, FI	same legal effec	ct as if made u	ınder	

SIGNATURE:

Mary Cour Michalak
SIGNATURE MO TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

June 25, 1996 (964) 561-0254

N 1841/184 F. F. IBING HIS BOOK BEEN BOOK GOIN BOOK GIVEN LILL BOOK GOIN

CR2E037 (12/95)