FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAR -2 PM 2:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N93000005433 (8)

1. Corporation Name

THE SARASOTA WRESTLING BOOSTERS, INC.

Principal Place of Business	Mailing Address
7 SOUTH LIME AVENUE SARASOTA FL 34237	7 SOUTH LIME AVENUE SARASOTA FL 34237

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/02/1993
3a. Date of Last Report: 05/01/1994
4. FEI Number: 65-0491096 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 2401 McCLELLAN PKWY	26 2401 McCLELLAN PKWY
Suite, Apt. #, etc. 22 ~~SARASOTA FL~~ N/A	Suite, Apt. #, etc. 27 N/A
City & State 23 ~~34239~~ SARASOTA FL	City & State 28 SARASOTA FL.
Zip / Country 24 34239 / 25 U.S.A.	Zip / Country 29 34239 / 30 U.S.A

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☑ — $68.75 Supplemental Fee Not Required
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
KURVIN, STEPHEN H 7 SOUTH LIME AVENUE SARASOTA FL 34237	81 Name: PAUL GUILLAUME 82 Street Address (P.O. Box Number is Not Acceptable): 2401 McCLELLAN PKWY 83 SARASOTA FL. 84 City: SARASOTA FL 85 Zip Code: 34239

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Paul Guillaume Treasure — 2/13/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☐ Change ☐ Addition
NAME	JONES, RON	1.2 NAME	
STREET ADDRESS	16110 WATERLINE ROAD	1.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL 34202	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	MARY ALICE MARIEN V/D ☑ Change ☐ Addition
NAME	BICKELL, DON	2.2 NAME	
STREET ADDRESS	3237 BENEVA ROAD - APT. 204	2.3 STREET ADDRESS	1343 HARBOR DR
CITY-ST-ZIP	SARASOTA FL 34232	2.4 CITY-ST-ZIP	SARASOTA FL. 34239
TITLE	D	3.1 TITLE	S/D ☑ Change ☐ Addition
NAME	THACKER, THERESA	3.2 NAME	
STREET ADDRESS	7876 S. LEEWYNN PLACE	3.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL 34240	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	T/D ☑ Change ☐ Addition
NAME	GUILLAUME, PAUL	4.2 NAME	
STREET ADDRESS	2154 BOUGANVILLEA ST.	4.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL 34232	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	☑ Change ☐ Addition
NAME	BLANTON, MARILYN	5.2 NAME	
STREET ADDRESS	5511 KENSINGTON ST.	5.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL 34232	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	P/D ☑ Change ☐ Addition
NAME	KURVIN, STEPHEN H	6.2 NAME	DICK THACKER
STREET ADDRESS	1944 ROLLING GREEN CIRCLE	6.3 STREET ADDRESS	7876 S. LEEWYNN PLACE
CITY-ST-ZIP	SARASOTA FL 34240	6.4 CITY-ST-ZIP	SARASOTA FL. 34240

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)(i), 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 added by attachment with an address.

SIGNATURE: Paul Guillaume — 2/13/95 (813)484-8800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0018740