

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N94000000105 (6)

1. Corporation Name

BIG TEAM FOR LITTLE PEOPLE, INC.

Principal Place of Business

1203 S.W. 12TH AVE.
SUITE A
OCALA FL 34474
US

Mailing Address

1203 SW 12TH AVE.
SUITE A
OCALA FL 34474-3107
US



3. Date Incorporated or Qualified
12/30/1993

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

4. FEI Number
59-3230695

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

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JOHNSON, MICHAEL W
307 NW 3RD STREET
OCALA FL 34470

81 Name

JULIE FOUSHEE

82

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

1203 SW 12th Street Suite A

83

84

City

OCALA

FL

85

Zip Code

34474

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

Julie A. Foushee

(NOTE: Registered Agent signature required when re-registering)

8.23.96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92

TITLE D
NAME FOUSHEE, JULIE
STREET ADDRESS 1203 SW 12TH AVE., STE. A
CITY-ST-ZIP Ocala FL ☐ DELETE

11 TITLE
12 NAME
13 STREET ADDRESS S.W. 12th Street
14 CITY-ST-ZIP ☒ Change ☐ Addition

TITLE D
NAME JOHNSON, MICHAEL W
STREET ADDRESS 307 NW 3RD STREET
CITY-ST-ZIP Ocala FL ☐ DELETE

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME HASSEL, PHYLLIS
STREET ADDRESS BOX 156 N/A
CITY-ST-ZIP REDDICK FL 32686 ☐ DELETE

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

61 TITLE
62 NAME
63 STREET ADDRESS
64 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 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:

Julie A. Foushee

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8.23.96 (904)622-9719

DATE DAYTIME PHONE #

CP2E037 (12/95)