FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

May 20 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

NAME

STREET ADDRESS CITY-ST-ZIP

DOCUMENT #

N94000002248 (2)

SPRIN	G HILL SPORTS ASSOCIATI	ON, INC.			
Principal Plac	e of Business	Mailing Address			belle matte matte dølle state tipde menet i det tidde
6354 CRANBROOK CT. SPRING HILL FL 34606		6354 CRANBROOK CT. SPRING HILL FL 34606-5	607		
				3. Date Incorporated or Qualifie 05/05/1994	d 3a. Date of Last Report 04/05/1996
· · · · · · · · · · · · · · · · · · ·	Place of Business	2a. Mailing Address		4. FEI Number 59-3240706	Applied For
21 Suite, Apt.	# eto	Suite, Apt. #, etc.		03 0240100	Not Applicable \$8.75 Additional
22	Ψ ₁ Θ(Ο.	27		5. Certificate of Status Desired	Fee Required
City & Stat	е	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip 24	Country 25	Zip 29	Country 30	This corporation has liability the Florida Statutes	ior intangible tax under s. 199.032, ☐ Yes ☑ No
24	9. Name and Address of Current		1301	10. Name and Address of New	
	5. 710/10 2/12 / 12/10 2/10	. Hogistorou rigorii	B1 Name) (
DEFRANCESCO, WAHNITA			82 Street	Address (P.O. Box Number is Not Accep	(ablo)
6354 CRANBROOK CT.				Address (F.O. Box Number is Not Accep	
spring	HILL FL 34606		83		
			84 City		FL 85 Zip Code
11 Purguant	to the provisions of Sections 617 0502	end 617 1508 Florida Stat	ules the above-name	d corporation submits this statement for th	
office or r	registered agent, or both, in the State	Florida Such change was	authorized by the co	d corporation submits this statement for the rporation's board of directors. I hereby ac	cept the appointment as registered
	am familiar with and accord the oblida		locida Statutes.		10/07
SIGNATURE	Signature, typed or printed name of registered agen		DTE: Registered Agent signatur	o required when reinstating)	DATE IN
12.	OFFICERS AND		18.		FICERS AND DIRECTORS IN 12
TITLE	DP	DELETE	1.1 THTLE		Change Addition
NAME	DEFRANCESCO, WAHNITA		1.2 NAME		
STREET ADDRESS	C/O 6354 CRANBROOK CT.		1.3 STREET ADDRESS	SAME	
CITY-ST-ZIP	SPRING HILL FL 34606		1.4 CITY - ST - ZIP	Jine	
TITLE	DV	☐ DELETE	2.1 TITLE	[NV	☐ Change ☐ Addition
NAME	JENKINS, PAT		2.2 NAME	Bebbie Walker	
STREET ADDRESS	3302 GARDEN AVENUE		2.3 STREET ADDRESS	1317 Berwick W	AY
CITY-ST-ZIP	SPRING HILL FL		2. 4 CITY-ST-ZIP	Bebbie Walker 1317 Berwick W Brooksville, 71	
TITLE	DS	[_] DELETE	3.1 TITLE	105	Change Addition
NAME	PEARSON, CANDY	_	3.2 NAME	Vivian ferkins	
STREET ADDRESS	13456 WHITE PLAINS STREET	Ĺ	33 STREET ADDRESS	11058 BAYLOG DO	•
CITY-ST-ZIP	SPRING HILL FL		3.4. CITY - ST - ZIP	Spring Hill, 76	
TITLE	DT	☐ DELETE	4.1(10TLE	DT	Change Addition
NAME	HETHERTON, LISA A.	•	4. P NAME	3374 BOTHANAVE	
STREET ADDRESS	12493 FISH COVE DRIVE		4.3 STREET ADDRESS		
CITY-ST-ZIP	SPRING HILL FL	T brits	4.4 City - St - ZiP	Spring Hill, Y.C.	Observe Classics
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP	-,	F7 NEUTY	5.4 CHY-ST-ZIP		
TITLE		DELETE	61'TITLE	1	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not quality 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 trystee 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.

6.4 CITY-ST-ZIP

6.3 STREET ADDRESS

62;NAME