FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



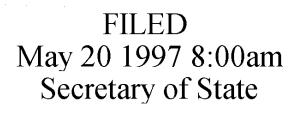
FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

N94000002427 (2) **DOCUMENT #**

nclpal Place of Business	Mailing Address
055 SW 180 AVE RD	10055 SW 180 AVE RD
JNNELLON FL 34432	DUNNELLON FL 34432-4424



DHS ATHLETIC BOOSTERS, INC. Principal Place of Business Mailing Address 10055 SW 180 AVE RD DUNNELLON FL 34432 DUNNELLON FL 34432										
					3. Date Incorporated or Qualifi 05/10/1994	ed 3a . Da	le of Last Re 04/19/19	eport 96		
2. Principal Place of Business 2a. Mailing Address 21					4. FEI Number 59-3330808	EU-3330000				
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		Not Applicable \$8.75 Additional Fee Required			
City & State City & State					6. Election Campaign Financing \$5.00 May B			May Be		
Zip	Country	28 Zip	1 Count	rv	Trust Fund Contribution 8. This corporation has liability	for intendible t	Added t			
24	25	29	30		Florida Statutes	Yes 🛚	No	199.032,		
	9. Name and Address of Currer	nt Registered Agent	8	1 Name	10. Name and Address of New	Registered A	igent			
11875 C	MICHAEL A XEDAR ST LLON FL 34431		8	2 Street A	address (P.O. Box Number is Not Acce	otable)	85 Zip (
office or r agent. I a SIGNATURE	im familiar with, and accept the oblig	etions of, Section 617.0503, Fi	lorida Statut	98.	corporation submits this statement for to oration's board of directors. I hereby an required when reinstating) ADDITIONS/CHANGES TO O	DATE				
TITLE	D OFFICERS AN	DELETE	1.1 TITLE	I	D ADDITIONS/CHANGES TO O	TI IOENS AND	Change	Addition		
NAME STREET ADDRESS CITY-ST-ZIP	SMITH, MICHAEL A 11875 CEDAR ST DUNNELLON FL 34431	1			<i>š</i> mi					
TITLE	D	₩ DELETE	21 TITLE		PD ~	_ 	Change	Addition		
NAME STREET ADDRESS	LOVE, JIM 12084 S WILLIAMS ST		1	et address	Wooten, Randall P 11536 Vost Springs	Rd	••	,		
CITY-ST-ZIP TITLE	DUNNELLON FL 34431 VPD	☐X DELETE	2. 4 City 3.1 Title	- ST- ZIP	Dunnellon, FL 34L	<u> </u>	(X) Change	☐ Addition		
name Street address	STENZEL, GARY 6888 SW 97TH PLACE		3.2 NAM 3.3 STRE	ET ADDRESS	Graham, Mike a1086 Raintree ST		• •			
CITY-ST-ZIP	OCALA FL	TV onese		- ST - ZIP	Dunnellon, FL 34	431	Change	222		
TITLE	SO Purdy, Becky	X DELETE	4.1 TITLE 4.2 NAM	.	SD Slattery, Darlene PO BOX 1184 Inglis, FL 34449	<u> </u>	Ki change	Addition		
NAME STREET ADDRESS	4251 SW SHASTA CT			ET ADDRÉSS	PO BOX 1184	•				
CITY-ST-ZIP_	DUNNELLON FL		4.4 CiTY	-ST - ZIP	Infis. FL 34449	Ï				
TITLE	TD	☐ DELETE	5.1 THTLE				Change	Addition		
NAME	INKELL, ROXIE		5.2 NAM							
STREET ADDRESS	1350 NW 120TH AVANUE			E1 ADDRESS						
CITY-ST-ZIP	OCALA FL	DELETE	5.4 CITY			· · · · · · · · · · · · · · · · · · ·	Change	Addition		
TITLE			6.1 TITLE	Į.			FT CHRIBE	MODITION (LLL)		
WARKE			g o interes	.						
NAME STREET ADDRESS			6.2 NAMI 6.3 ISTRE	ET ADDRESS						

I do hereby certify that the Information supplied with this filing 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 logal 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.