

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 # N94000002447 (0)

1. Corporation Name

TITUSVILLE HIGH SCHOOL ACADEMIC BOOSTERS, INC.



Principal Place of Business

TITUSVILLE HIGH SCHOOL
150 TERRIER PLACE
TITUSVILLE FL 32780

Mailing Address

TITUSVILLE HIGH SCHOOL
150 TERRIER PLACE
TITUSVILLE FL 32780

3. Date Incorporated or Qualified
05/13/1994

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

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number
59-3216210

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TULLEY, JAMES H JR.
TITUSVILLE HIGH SCHOOL
150 TERRIER PLACE
TITUSVILLE FL 32780

81 Name

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

83

84 City

FL

85 Zip Code

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

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 PD
NAME TULLEY, JAMES H JR.
STREET ADDRESS 1305 RANCHERO AVENUE
CITY-ST-ZIP TITUSVILLE FL ☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VP
NAME HILTON, JEANNE
STREET ADDRESS 3428 ROYAL OAK DRIVE
CITY-ST-ZIP TITUSVILLE FL 32780 ☐ DELETE

2.1 TITLE VP
2.2 NAME Stefanov, James T.
2.3 STREET ADDRESS 3020 Sandalwood Lane
2.4 CITY-ST-ZIP Titusville, FL 32780 ☒ Change ☐ Addition

TITLE VP
NAME DUNN, KATHY
STREET ADDRESS 3795 RANEY ROAD
CITY-ST-ZIP TITUSVILLE FL 32780 ☐ DELETE

3.1 TITLE VP
3.2 NAME Jarvis, Glenda
3.3 STREET ADDRESS 2746 Knox McRae
3.4 CITY-ST-ZIP Titusville, FL 32780 ☒ Change ☐ Addition

TITLE SD
NAME LEE, FRANCES L
STREET ADDRESS 3525 SABLE PALM LANE C
CITY-ST-ZIP TITUSVILLE FL ☐ DELETE

4.1 TITLE SD
4.2 NAME McElrath, Carol
4.3 STREET ADDRESS 2535 Chesterfield Ct.
4.4 CITY-ST-ZIP Titusville, FL 32780 ☒ Change ☐ Addition

TITLE TD
NAME SACHDEV, SARITA
STREET ADDRESS 3504 TRAVIS PLACE
CITY-ST-ZIP TITUSVILLE FL ☐ DELETE

5.1 TITLE TD
5.2 NAME LEE, Frances L
5.3 STREET ADDRESS 3525 Sable Palm Ln #C
5.4 CITY-ST-ZIP Titusville, FL 32780 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAMES H. TULLEY JR 4-30-96 407-3831268

Date

Daytime Phone #

CR2E037 (12/95)