## **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

## DOCUMENT # N9400005345 (3)

BOCA RATON BOBCAT BOOSTER CLUB, INC.

## FILED Jun 24 1997 8:00am Secretary of State

. 555	TIMON BODOM BOOGLE	OLOD, INC.			
Principal Plac	e of Business	Mailing Address			80151 09111 09105 41160 11151 41005 0151 5001
898 S.W. 18TH BOCA RATON		P.O. BOX 1042 BOCA RATON FL 33429-104	2		
				3. Date Incorporated or Qualified 10/27/1994	3a. Date of Last Report 04/01/1996
21 150	Place of Business LNW 15 LT	2a. Mailing Address 26		4. FEI Number 65-0534421	Applied For Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	SB.75 Additional Fee Required
23 BOC	A KATON, FZ.	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
24 33 4			Country 30		Yes No
ļ <u>.</u>	9. Name and Address of Current	Registered Agent		10. Name and Address of New Re	gistered Agent
	•		81 Name		
FLACK, JAMES T 82 Street Addre				Address (P.O. Box Number is Not Assessed	1-1
898 S.W+ 18TH STREET					
BOCA R	ATON FL 33486		83	•	
		•	84 City	*****	FL 85 Zip Code
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the component of the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authous ed by the corporation's and 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 agen		Registered Agent signature		DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	D CARVA	☑ DELETE		TREASURER	Change Addition
NAME	JANSON, GARY M.		1.2 NAME	ZAWISLAK, WALT	ek E
STREET ADDRESS	1420 SW 19TH ST		1.3 STREET ADDRESS	7601 MARTINIA	221/22
CITY-ST-ZIP	BOCA RATON FL	- I Pourte	1.4 CITY - ST - ZIP	BOCK ANTON FI	20133
TITLE	D	DELETE	2.1 TITLE	SELRETARY	Change Addition
NAME	SETA, JOE		2.2 NAME	BRUCE BARSALONA	44.24
STREET ADDRESS	785 N.E. 36TH STREET		2.3 STREET ADDRESS	GOOT N. FLORIAL	7707
CITY-S1-7AP TITLE	BOCA RATON FL 33431	DELETE	2.4 City-St-ZiP	BOCA PATON, FL	Change Addition
	D BURN BOREDT A	L DECEIE	3.1 TITLE D	Joseph MURPH)	Change La Addition
NAME OTOSSY ADDRESS	BUSH, ROBERT A 988 SW 9TH AVE.		3.2 NAME	1124 SW 184.	ST PRESIDENT
STREET ADDRESS	BOCA RATON FI. 33486		3.3 STREET ADDRESS		VICE ST PRESIDENT
CITY-ST-ZIP TITLE	BOOK RATOR 1. 33480	DELETE	3.4. CITY - ST - ZIP 4.1 TITLE	BOCKARTIN FI	33486 Change Addition
NAME		- Presic	4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZiP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP	. 3		5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE	***************************************	Change Addition
NAME .			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		Ì
OTTY OT THO					

14. 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 official 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 3 if charged, of on an attachment with an address.