FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

BIG BEND BASKETBALL OFFICIALS ASSOCIATION, INC. Principal Place of Business P.O. BOX 10407 TALLAHASSEE FL 32302 A Pincipal Place of Business P.O. BOX 10407 TALLAHASSEE FL 32302 A Pincipal Place of Business P.O. BOX 10407 TALLAHASSEE FL 32302 A Pincipal Place of Business P.O. BOX 10407 TALLAHASSEE FL 32302 A Pincipal Place of Business P.O. BOX 10407 TALLAHASSEE FL 32302 A Pincipal Place of Business P.O. BOX 10407 TALLAHASSEE FL 32302 A Pincipal Place of Business P.O. BOX 10407 TALLAHASSEE FL 32302 A Pincipal Place of Business P.O. BOX 10407 TALLAHASSEE FL 32302 A Pincipal Place of Business P.O. BOX 10407 TALLAHASSEE FL 32302 A Pincipal Place of Business P.O. BOX 10407 TALLAHASSEE FL 32302 A Pincipal Place of Business P.O. BOX 10407 TALLAHASSEE FL 32302 A Pincipal Place of Business P.O. BOX 10407 TALLAHASSEE FL 32308 A City P.O. BOX 10407 TALLAHASSEE FL 32308 A City P.O. BOX Number is Not Acceptable) To Name and Address of New Registered Agent TO Name and Address (P.O. Box Number is Not Acceptable) To Name and Address of New Registered Agent TALLAHASSEE FL 32308 A City P.O. BOX Number is Not Acceptable) To 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 register.
P.O. BOX 10407 TALLAHASSEE FL 32302 P.O. BOX 10407 TALLAHASSEE FL 32302 2. Principal Place of Business 2. Mailing Address 2. Principal Place of Business 2. Mailing Address 2. Principal Place of Business 2. Mailing Address 2. Principal Place of Business 3. Date Incorporated or Qualified 04/13/1995 4. FEI Number 59-3086124 5. Certificate of Status Desired Fee Required Fee Required Fee Required Fee Required Fee Required Fee Required Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? 23 26 27 27 28 28 29 30 40 413/1995 4. FEI Number Fee Required Fee Required Fee Required Fee Required Fee Required Fee Required Fees Added to Fees City & State Fees Figure Fees Figure F
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TALLAHASSEE FL 32302 4. FEI Number
TALLAHASSEE FL 32302 4. FEI Number
Applied For 59-3086124 2. Principal Place of Busines
2. Principal Place of Business 2. Mailing Address 2. Mailing Address 2. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 2. Country 2. Zip Country 2. Sip Country 2. Name and Address of Current Registered Agent SEARS, SCOTT 1908 DOOMAR TALLAHASSEE FL 32308 2. Mailing Address 5. Certificate of Status Desired \$8.75 Additional Fee Required \$5.00 May Be Added to Fees \$5.00 May Be Trust Fund Contribution Added to Fees Added to Fees \$5.00 May Be Trust Fund Contribution Added to Fees \$6.00 May Be Trust Fund Contribution Added to Fees \$6.00 May Be Trust Fund Contribution Added to Fees \$6.00 May Be Trust Fund Contribution Added to Fees \$6.00 May Be Trust Fund Contribution Added to Fees \$6.00 May Be Trust Fund Contribution Added to Fees \$6.00 May Be Trust Fund Contribution Added to Fees \$6.00 May Be Trust Fund Contribution Added to Fees \$6.00 May Be Trust Fund Contribution Added to Fees \$6.00 May Be Trust Fund Contribution Added to Fees \$6.00 May Be Trust Fund Contribution Added to Fees \$6.00 May Be Trust Fund Contribution Added to Fees \$6.00 May Be Trust Fund Contribution Added to Fees \$6.00 May Be Trust Fund Contribution Added to Fees \$6.00 May Be Trust Fund Contribution Added to Fees \$6.00 May Be Trust Fund Contribution Added to Fees \$6.00 May Be Trust Fund Contribution Added to Fees \$6.00 May Be Trust Fund Contribution \$6.00 May
28 Sulte, Apt. #, etc. Sulte, Apt. #, etc. Sulte, Apt. #, etc. City & State City & State Zip Country Zip Country Zip Country Search Sears, SCOTT 1908 DOOMAR TAILLAHASSEE FL 32308 5. Certificate of Status Desired Fee Required Fee Req
Sulte, Apt. #, etc. Sulte, Apt. #, etc. 27 City & State City & State City & State Zip Country Zip Zip Zip Zip Zip Zip Zip Zi
Trust Fund Contribution Added to Fees
28 Country Zip Country 25 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No Personal Property Tax due June 30. Yes No No Personal Property Tax due June 30. Yes No No Personal Property Tax due June 30. Yes No No Personal Property Tax due June 30. Yes No No Personal Property Tax due June 30. Yes No No Personal Property Tax due June 30. Yes No No Personal Property Tax due June 30. Yes No No No Personal Property Tax due June 30. Yes No No Personal Property Tax due June 30. Yes No No Personal Property Tax due June 30. Yes No No Personal Property Tax due June 30. Yes No No Personal Property Tax due June 30. Yes No No Personal Property Tax due June 30. Yes No No Personal Property Tax due June 30. Yes No No Personal Property Tax due June 30. Yes No No No Personal Property Tax due June 30. Yes No No No Personal Property Tax due June 30. Yes No No No Personal Property Tax due June 30. Yes No No No Personal Property Tax due June 30. Yes No No No Personal Property Tax due June 30. Yes No
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25 29 30 Personal Property Tax due June 30. Yes No 9. Name and Address of Current Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 10. Registered Agent 82 Street Address (P.O. Box Number is Not Acceptable) 83 FL Address (P.O. Box Number is Not Acceptable) 84 City 85 Zip Code
9. Name and Address of Current Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 1908 DOOMAR TALLAHASSEE FL 32308 84 City FL 85 Zip Code
SEARS, SCOTT 1908 DOOMAR TALLAHASSEE FL 32308 82 Street Address (P.O. Box Number is Not Acceptable) 83 FL 85 Zip Code
1908 DOOMAR TALLAHASSEE FL 32308 83 84 City FL 85 Zip Code
TALLAHASSEE FL 32308 83 84 City FL 85 Zip Code
84 City FL 85 Zip Code
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11. Pursuant to the provisions of Sections 617.0502 and 617.0508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register 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) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE PD DELETE 1.1 TITLE DELETE Addit
NAME DRAYTON, CAREY 12 NAME
STREET ADDRESS 2280 INDIAN SPRINGS CT 1.3 STREET ADDRESS
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NAME ROCKER, RODNEY STREET ADDRESS 6604 WAR ADMIRAL TR. 2.3 STREET ADDRESS 2.3 STREET ADDRESS
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CITY-S1-ZIP
TITLE DELETE 6.1 TITLE DELETE 6.2 NAME -01/29/9801006011
STREET ADDRESS ***61.25

14. Thereby 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 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:

1/20/98

904-891-3946

FILED

Jan 28 1998 8:00am

Secretary of State