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Aug 06 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N95000002890 (0)

1. Corporation Name

THE TALLAHASSEE TIGER SHARK FAN CLUB, INCORPORATED

Principal Place of Business

Mailing Address

P.O. BOX 3812
TALLAHASSEE FL 32315

P.O. BOX 3812
TALLAHASSEE FL 32315-3812



2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified
06/19/1995

3a. Date of Last Report
07/11/1996

4. FEI Number

59-3337537

Applied For

Not Applicable

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

SWEET, CAROL
505 WEST PENSACOLA #1
TALLAHASSEE TIGER SHARK FAN CLUB
TALLAHASSEE FL 32301

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

Carol Sweet

(NOTE: Registered Agent signature required when reinstating)

DATE

6-2-97

12. OFFICERS AND DIRECTORS

TITLE DP ☒ DELETE

NAME WARTENBERG, LINLEY
STREET ADDRESS RT 5 BOX 54
CITY-ST-ZIP HAVANA FL

TITLE DV ☐ DELETE

NAME SPROUL, KIM
STREET ADDRESS 2329 BRUN MAHR LANE
CITY-ST-ZIP TALLAHASSEE FL

TITLE DS ☐ DELETE

NAME HATMAKER, SONJA
STREET ADDRESS 37 SUMMER LANE
CITY-ST-ZIP CRAWFORDVILLE FL

TITLE DT ☐ DELETE

NAME SWEET, CAROL
STREET ADDRESS 6715 ALANA DALE TRAIL
CITY-ST-ZIP TALLAHASSEE FL

TITLE D ☐ DELETE

NAME SAWYER, BETSY
STREET ADDRESS 2903 SHAMROCK SOUTH
CITY-ST-ZIP TALLAHASSEE FL

TITLE D ☐ DELETE

NAME WAAS, GEORGE L
STREET ADDRESS 3797 SALLY LANE
CITY-ST-ZIP TALLAHASSEE FL 32312

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DP ☒ Change ☐ Addition

1.2 NAME SPROUL, KIM
1.3 STREET ADDRESS 2329 BRUN MAHR LANE
1.4 CITY-ST-ZIP TALLAHASSEE FL 32303

2.1 TITLE DV ☐ Change ☒ Addition

2.2 NAME FRASER, JOHN A
2.3 STREET ADDRESS 40 BOX 748 3543 RIDGEMOUNT RIDGE
2.4 CITY-ST-ZIP TALLAHASSEE FL 32304 32312

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 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.

CR2E037 (9/96)