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Jun 25 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # N95000003642 (4)

1. Corporation Name

PACE HIGH SCHOOL SOCCER BOOSTERS, INC.

Principal Place of Business

Mailing Address

4085 NORRIS ROAD
PACE FL 32571

P.O. BOX 1087
PACE FL 32571
US



3. Date Incorporated or Qualified

07/31/1995

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 Zip Country

29 Zip Country

6. Certificate of Status Desired

\$8.75 Additional
Fee Required

8. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes ☒ No NA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KIMSEY, CHARLES
6136 SADDLECLUB ROAD
PACE FL 32571

81 Name Steven L. Benton

82 Street Address (P.O. Box Number is Not Acceptable)
3918 Wiley Penton Rd

83

84 City Pace

FL

85 Zip Code 32571

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 *Steven L. Benton*

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 VD
NAME HUGHES, TIMOTHY
STREET ADDRESS 6688 WHISPERING WOODS DR
CITY-ST-ZIP PACE FL 32571

TITLE VD
NAME KING, BRENDA
STREET ADDRESS 3488 BARKWOOD DR
CITY-ST-ZIP PACE FL 32571

TITLE SD
NAME ZIMMERMANN, SUE
STREET ADDRESS 3528 SWEET BAY DR
CITY-ST-ZIP PACE FL 32571

TITLE PD
NAME KIMSEY, CHARLES
STREET ADDRESS 6136 SADDLE CLUB RD
CITY-ST-ZIP PACE FL 32571

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE D President
1.2 NAME Richard J. Bliss
1.3 STREET ADDRESS 4896 Bayou Ridge Dr.
1.4 CITY-ST-ZIP Pace, FL 32571

2.1 TITLE D V. President
2.2 NAME James A. Finley
2.3 STREET ADDRESS 4692 Shadow Wood Ln
2.4 CITY-ST-ZIP Pace, FL 32571

3.1 TITLE D Treasurer
3.2 NAME Steven L. Benton
3.3 STREET ADDRESS 3918 Wiley Penton Rd
3.4 CITY-ST-ZIP Pace, FL 32571

4.1 TITLE D Secretary
4.2 NAME Camilla Mazurek
4.3 STREET ADDRESS 3440 Wesleyan Ct.
4.4 CITY-ST-ZIP Pace, FL 32571

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I 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.

SIGNATURE *Steven L. Benton*

SC 695-5225 x153
4-29-98 605-5225 x153

CR2E037 (10/97)