

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90231 050 ****61.25

DOCUMENT # **N95000003642 (4)**

Corporation Name

PACE HIGH SCHOOL SOCCER BOOSTERS, INC.

Principal Place of Business

Mailing Address

4065 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

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. 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

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

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)

83 *3918 Wiley Penton Rd*

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

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 5688 WHISPERING WOODS DR
CITY-ST-ZIP PACE FL 32571 ☒ DELETE

1.1 TITLE *D* President
1.2 NAME *Robert W. Seavers Jr.*
1.3 STREET ADDRESS *3731 Saddle Club Cir.*
1.4 CITY-ST-ZIP *Pace, FL 32571* ☐ Change ☒ Addition

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

2.1 TITLE *D* V. President
2.2 NAME *Robert Valarde*
2.3 STREET ADDRESS *4288 7th Ave.*
2.4 CITY-ST-ZIP *Pace, FL 32571* ☐ Change ☒ Addition

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

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* ☐ Change ☒ Addition

TITLE PD
NAME KIMSEY, CHARLES
STREET ADDRESS 6136 SADDLECLUB RD
CITY-ST-ZIP PACE FL 32571 ☒ DELETE

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* ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ 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 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 checked on an alternate agent with an address.

SIGNATURE:

Steven L. Benton

4-30-99 595-5225 x153