

FILE NOW: FILING FEE IS \$61.25

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May 09 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N95000003890 (9)**

1. Corporation Name

**PALM BAY ATHLETIC ASSOCIATION, INC.**



Principal Place of Business	Mailing Address
750 HIGHLAND AVENUE NW PALM BAY FL 32907	750 HIGHLAND AVENUE NW PALM BAY FL 32907-7729

3. Date Incorporated or Qualified <b>08/14/1995</b>	3a. Date of Last Report <b>02/13/1996</b>
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2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc	26 <b>1762 Plantation Cir.</b>
22 City & State	27 <b>Palm Bay</b>
23 Zip	28 <b>Palm Bay, FL</b>
24 Country	29 <b>32909</b>
25	30

4. FEI Number <b>59-3330737</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
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6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
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8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No
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9. Name and Address of Current Registered Agent
<b>REDMOND, THOMAS G</b> <b>750 HIGHLAND AVENUE NW</b> <b>PALM BAY FL 32907</b>

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 **X Thomas G. Redmond**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	NAME
PD	REDMOND, MARY C
750 HIGHLAND AVENUE NW	
PALM BAY FL 32907	
TITLE	NAME
SD	REDMOND, THOMAS G
750 HIGHLAND AVENUE NW	
PALM BAY FL 32907	
TITLE	NAME
VD	DIOTTE, LORETTA R
870 AACHEN AVENUE NW	
PALM BAY FL 32907	
TITLE	NAME
TD	DIOTTE, PIERRE P
870 AACHEN AVENUE NW	
PALM BAY FL 32907	
TITLE	NAME
TITLE	NAME

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	1.2 NAME
1.3 STREET ADDRESS	1.4 CITY - ST - ZIP
2.1 TITLE	2.2 NAME
2.3 STREET ADDRESS	2.4 CITY - ST - ZIP
3.1 TITLE	3.2 NAME
3.3 STREET ADDRESS	3.4 CITY - ST - ZIP
4.1 TITLE	4.2 NAME
4.3 STREET ADDRESS	4.4 CITY - ST - ZIP
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 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.

SIGNATURE: **Mary C Redmond**

Signature and typed or printed name of signing officer or director

4/24/97

407-984-7340

CR2E037 (9/96)