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Mar 03 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 # N96000000305 (0)

1. Corporation Name

BELL BOYS & GIRLS ATHLETIC ASSOCIATION, INC.



Principal Place of Business

Mailing Address

3470 NW 57 TRAIL  
BELL FL 32619

3470 NW 57 TRAIL  
BELL FL 32619-4030

3. Date Incorporated or Qualified  
01/16/1996

3a. Date of Last Report

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

25

29

30

4. FEI Number

59-3333096

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PHILMAN, LINDA  
3470 BW 57 TRAIL  
BELL FL 32619

3470 NW 57th Trail

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

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 PD  
NAME EARY, RICHARD  
STREET ADDRESS RT 2 BOX 2210  
CITY-ST-ZIP BELL FL 32619

1.1 TITLE PD  
1.2 NAME Eary, Richard  
1.3 STREET ADDRESS 4322 NW 47th Place  
1.4 CITY-ST-ZIP Bell, FL 32619 ☒ Change ☐ Addition

TITLE V  
NAME MAULDIN, MICHAEL  
STREET ADDRESS RT 1 BOX 886  
CITY-ST-ZIP HIGH SPRINGS FL 32643

2.1 TITLE V  
2.2 NAME Thomas, Lloyd  
2.3 STREET ADDRESS 3200 NW 30th St.  
2.4 CITY-ST-ZIP Bell, FL 32619 ☐ Change ☒ Addition

TITLE TD  
NAME BRYANT, ARA  
STREET ADDRESS P O BOX 784 N/A  
CITY-ST-ZIP BELL FL 32619-0784

3.1 TITLE TD  
3.2 NAME Bryant, Ara  
3.3 STREET ADDRESS 3230 NW 30th Ave.  
3.4 CITY-ST-ZIP Bell, FL 32619 ☐ Change ☐ Addition

TITLE SD  
NAME PHILMAN, LINDA  
STREET ADDRESS RT 2 BOX 2074 3470 NW 57th Tr.  
CITY-ST-ZIP BELL FL 32619

4.1 TITLE SD  
4.2 NAME Philman, Linda  
4.3 STREET ADDRESS 3470 N.W. 57th Trail  
4.4 CITY-ST-ZIP Bell FL 32619 ☒ Change ☐ Addition

TITLE D  
NAME DOUGLAS, DEWITT  
STREET ADDRESS RT 1 BOX 817  
CITY-ST-ZIP HIGH SPRINGS FL 32643

5.1 TITLE D  
5.2 NAME Douglas, Dewitt  
5.3 STREET ADDRESS 3219 NE CR 138  
5.4 CITY-ST-ZIP High Springs, FL 32643 ☒ Change ☐ Addition

TITLE D  
NAME ATWOOD, JOE  
STREET ADDRESS RT 1 BOX 778  
CITY-ST-ZIP HIGH SPRINGS FL 32643

6.1 TITLE D  
6.2 NAME Atwood, Joe  
6.3 STREET ADDRESS 8649 NW 40th Ct.  
6.4 CITY-ST-ZIP High Springs FL 32643 ☒ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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:

Linda A. Philman

2/14/97 904 935-0312

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0011847

CR2E037 (9/96)