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May 19 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 # N96000000885 (1)

1. Corporation Name

SUNCOAST INKSLINGERS' CLUB INC.

Principal Place of Business

Mailing Address

POST OFFICE BOX 340568
TAMPA FL 33694

POST OFFICE BOX 340568
TAMPA FL 33694-0568



3. Date Incorporated or Qualified

02/20/1996

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CASSADY, JOHN R II
4202 BRENTWOOD PARK CIRCLE
TAMPA FL 33624

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 NAME STREET ADDRESS CITY-ST-ZIP

P CASSADY, JOHN R II — D

4202 BRENTWOOD PARK CIRCLE

TAMPA FL 33624

TITLE NAME STREET ADDRESS CITY-ST-ZIP

T ROTHMEELER, CARL — D

15906 CRYING WIND DRIVE

TAMPA FL 33624

TITLE NAME STREET ADDRESS CITY-ST-ZIP

V HERNANDEZ, BILL — D

2010 PLANTATION KEY CIRCLE #302

BRANDON FL 33511

TITLE NAME STREET ADDRESS CITY-ST-ZIP

S HERNANDEZ, LISA — D

2010 PLANTATION KEY CIRCLE #302

BRANDON FL 33511

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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TITLE NAME STREET ADDRESS CITY-ST-ZIP

1.1 TITLE SECRETARY

1.2 NAME RYAN, PATRICK

1.3 STREET ADDRESS 16118 DARMAN DR.

1.4 CITY-ST-ZIP TAMPA FL 33624

2.1 TITLE BOARD MEMBER

2.2 NAME FRISK, BUL

2.3 STREET ADDRESS 30 BECKTREE CT.

2.4 CITY-ST-ZIP PALM HARBOR, FL 34683

3.1 TITLE Board member

3.2 NAME Johnson, MICHAEL

3.3 STREET ADDRESS 303 E. PARIS ST.

3.4 CITY-ST-ZIP TAMPA, FL 33604

4.1 TITLE Board member

4.2 NAME MOORE, ALIX

4.3 STREET ADDRESS 3922 MYRA ST.

4.4 CITY-ST-ZIP TAMPA FL 33614

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:

JOHN R. CASSADY II

3/14/97 (813) 264-4341

CR2E037 (9/96)

BK dep \$61.25