

FILE NOW: FILING FEE IS \$61.25

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Jul 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
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DOCUMENT # N96000002502 (0)
1. Corporation Name
POLK COUNTY YOUTH HOCKEY, INC.



Principal Place of Business 1130 AFTON STREET LAKELAND FL 33803	Mailing Address 1130 AFTON STREET LAKELAND FL 33803-3202
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3. Date Incorporated or Qualified 05/06/1996	3a. Date of Last Report
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2. Principal Place of Business 21. Suite, Apt. #, etc. 22. City & State 23. Zip 24. Country	2a. Mailing Address 26. Suite, Apt. #, etc. 27. City & State 28. Zip 29. Country
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4. FEI Number 59-3377292	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**NICHOLSON, VERA
1130 AFTON STREET
LAKELAND FL 33803**

10. Name and Address of New Registered Agent

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

TITLE	D <input type="checkbox"/> DELETE
NAME	NICHOLSON, VERA
STREET ADDRESS	1130 AFTON STREET
CITY-ST-ZIP	LAKELAND FL 33803
TITLE	D <input type="checkbox"/> DELETE
NAME	DUGGAR, RICHARD
STREET ADDRESS	104 BUCHANAN DR.
CITY-ST-ZIP	WINTER HAVEN FL 33884
TITLE	D <input type="checkbox"/> DELETE
NAME	BILLINGSLEY, STEVE
STREET ADDRESS	3104 CYPRESS WOOD BLVD.
CITY-ST-ZIP	WINTER HAVEN FL 33884
TITLE	D <input type="checkbox"/> DELETE
NAME	BAZO, GUERRA
STREET ADDRESS	1826 3RD STREET, S.E.
CITY-ST-ZIP	WINTER HAVEN FL 33880
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

See attached

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: *SIGNATURE OF DWAIN C. SHEFFIELD 6-4-97 941-294-4157*

CR2E037 (9/96)

POLK COUNTY YOUTH HOCKEY
BOARD OF DIRECTORS
1997

PRESIDENT

Eddy Bazo
1826 3rd St., SE
Winter Haven, 33880
299-4272

VICE-PRESIDENT

Jeff Grant
1216 Lake Loop
Winter Haven, 33881
294-9017

SECRETARY

Maryann Cassell
3834 Gaines Ct., SE
Winter Haven, 33884
324-7903

TREASURER

Cris Sheffield
2009 10th St., NW
Winter Haven, 33881
293-0259

8 AND UNDER REPRESENTATIVES

Barbara Bergstrom
2340 Buck Board Rd.
Lake Wales, 33853
678-2816

Jufie Borum
1214 Lake Loop
Winter Haven, 33880
293-5727

12 AND UNDER REPRESENTATIVES

Vicki San Martin
2013 Kirkland Lake Dr.
Auburndale, 33823
967-4503

Joan and Paul Turner
145 Lameraux Rd.
Winter Haven, 33884
325-9275

16 AND UNDER REPRESENTATIVES

Chris Jacobsen
5092 Windover Lane
Lakeland, 33813
646-8040

Karen Knitt
972 Whisper Lake Dr.
Winter Haven, 33880
299-5728

✓ Vera Nicholson
1130 Afton St.
Lakeland, 33803
686-0847