
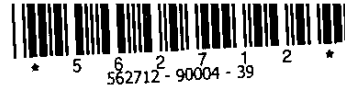


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May 05, 1999 8:00 am
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NONPROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N96000003427					
1. Corporation Name TATE HIGH SCHOOL CHEER ASSOCIATION, INC.					
Principal Place of Business 1101 SUMMER SHADE LANE CANTONMENT FL 32533 US			Mailing Address P.O. BOX 665 GONZALEZ FL 32560 US		



2. Principal Place of Business 21 1205 Mill Creek Trail Suite, Apt. #, etc. 22 City & State 23 Cantonment, FL Zip 24 32533		2a. Mailing Address 26 same as above Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30		3. Date Incorporated or Qualified 06/25/1996 4. FEI Number 59-3398640 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	
9. Name and Address of Current Registered Agent GILG, CHERYL 1101 SUMMER SHADE LANE CANTONMENT FL 32533			10. Name and Address of New Registered Agent B1 Name Stoner, Marie M. B2 Street Address (P.O. Box Number is Not Acceptable) 1205 Mill Creek Trail B3 B4 City Cantonment, FL B5 Zip Code 32533		
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 <i>Marie M. Stoner</i> DATE 4/28/99 <small>(NOTE: Registered Agent signature required when reinstating)</small>					

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input checked="" type="checkbox"/> DELETE	1.1 TITLE	President - D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCDANIEL, TERRIE	1.2 NAME	Manning, Kathy
STREET ADDRESS	263 MAN O'WAR CIRCLE	1.3 STREET ADDRESS	3265 Copper Ridge Circle
CITY-ST-ZIP	CANTONMENT FL 32533	1.4 CITY-ST-ZIP	Cantonment, FL 32533
TITLE	VPD <input checked="" type="checkbox"/> DELETE	2.1 TITLE	Vice President - D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEWIS, LUANN	2.2 NAME	Sapp, Laurie
STREET ADDRESS	1840 MATE CIRCLE	2.3 STREET ADDRESS	3108 Creekwood Drive
CITY-ST-ZIP	CANTONMENT FL 32533	2.4 CITY-ST-ZIP	Cantonment, FL 32533
TITLE	TD <input checked="" type="checkbox"/> DELETE	3.1 TITLE	Treasurer - D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GILG, CHERYL	3.2 NAME	Stoner, Marie M.
STREET ADDRESS	1101 SUMMER SHADE LANE	3.3 STREET ADDRESS	1205 Mill Creek Trail
CITY-ST-ZIP	CANTONMENT FL 32533	3.4 CITY-ST-ZIP	Cantonment, FL 32533
TITLE	SD <input type="checkbox"/> DELETE	4.1 TITLE	
NAME	SMITH, KAREN	4.2 NAME	
STREET ADDRESS	11584 DUELING OAKS DRIVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	PENSACOLA FL 32514	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

Marie M. Stoner
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/99 850)475-0901
 Date Daytime Phone

CR2E037 (11/98)