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Jul 02 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N96000004636 (4)

1. Corporation Name

HARBOR CITY GYMNASIIC BOOSTER CLUB, INC.



Principal Place of Business

Mailing Address

2720 CENTER PLACE
MELBOURNE FL 32940
US

2720 CENTER PLACE
BELBOURNE FL 32940
US

3. Date Incorporated or Qualified

09/03/1996

4. FEI Number

59-3402892

Applied For

Not Applicable

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

OPPELT, JANICE
4463 LONGLAKE RD
MELBOURNE FL 32934

81 Name

Liane R. mihlebach

82 Street Address (P.O. Box Number is Not Acceptable)

5195 Palm Dr.

83

84 City

Melbourne Beach

FL

85 Zip Code
32951

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

Liane R. mihlebach

(NOTE: Registered Agent signature required when reinstating)

4/29/98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME OPPELT, JANCIE
STREET ADDRESS 4463 LONGLAKE RD
CITY-ST-ZIP MELBOURNE FL

1.1 TITLE P
1.2 NAME Liane mihlebach
1.3 STREET ADDRESS 5195 Palm Dr.
1.4 CITY-ST-ZIP Melbourne Beach, FL 32951

TITLE VP
NAME MIHLEBACK, LIANE
STREET ADDRESS 5195 PALM DR
CITY-ST-ZIP MELBOURNE BEACH FL

2.1 TITLE VP
2.2 NAME Judy Sattano
2.3 STREET ADDRESS 6125 Chapman St.
2.4 CITY-ST-ZIP Cocoa FL 32927

TITLE S
NAME LARSON, SUSIE
STREET ADDRESS 4430 EL DORADO WAY
CITY-ST-ZIP MELBOURNE FL

3.1 TITLE S
3.2 NAME Patty Correia
3.3 STREET ADDRESS 300 Carmel Dr.
3.4 CITY-ST-ZIP Melbourne, FL 32940

TITLE T
NAME BARNA, MARY
STREET ADDRESS 1835 GULF CT
CITY-ST-ZIP INDIANLANTIC FL

4.1 TITLE T
4.2 NAME Holly Hunt
4.3 STREET ADDRESS 1065 Old Parsonage Dr.
4.4 CITY-ST-ZIP Merritt Island, FL 32952

TITLE D
NAME SATTANO, JUDY
STREET ADDRESS 4769 BROOKHAVEN ST
CITY-ST-ZIP COCOA FL

5.1 TITLE D
5.2 NAME Ginny Dismukes
5.3 STREET ADDRESS 4350 Canard Rd.
5.4 CITY-ST-ZIP Melbourne, FL 32934

TITLE D
NAME CORREIA, PATTY
STREET ADDRESS 300 CARMEL DR
CITY-ST-ZIP MELBOURNE FL

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
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.

SIGNATURE:

Liane R. mihlebach

4/29/98 407-974-8926

CR2E037 (10/97)