

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90259 029 ****61.25

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1. Corporation Name

COAST TO COAST BASKETBALL CLUB INC.

Principal Place of Business
8115 LAGOS DE CAMPO BLVD.
TAMARAC FL 33321

Mailing Address
8115 LAGOS DE CAMPO BLVD.
TAMARAC FL 33321



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

10/10/1996

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number

65-0709560

Applied For

Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

23 Zip Country

28 Zip Country

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

24 Zip Country

29 Zip Country

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

ALSTON, ERIC A
8115 LAGOS DE CAMPO BLVD.
TAMARAC FL 33321

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 ☐ DELETE
NAME ALSTON, ERIC A
STREET ADDRESS 8115 LAGOS DE CAMPOS BLVD
CITY-ST-ZIP TAMARAC FL 33321

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE VTD ☐ DELETE
NAME DOOLING, ERIC
STREET ADDRESS 2016 NW 3RD COURT
CITY-ST-ZIP FT LAUDERDALE FL 33311

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE SDT ☐ DELETE
NAME LYNCH, JONATHAN E
STREET ADDRESS 4110 HUNTERS HILL CIRCLE
CITY-ST-ZIP FOX RIDGE MD 21133

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE D ☐ DELETE
NAME MCDUFFIE, O.J.
STREET ADDRESS 653 SPINNAKER
CITY-ST-ZIP FT. LAUDERDALE FL 33326

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE CD ☐ DELETE
NAME MITCHELL, STEFFON
STREET ADDRESS 1221 DUNCAN PLACE N.E.
CITY-ST-ZIP WASHINGTON DC 20002

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE MD ☐ DELETE
NAME WAGENHEIM, RICHARD
STREET ADDRESS 2101 NORTH ANDREWS AV
CITY-ST-ZIP FT. LAUDERDALE FL 33301

6.1 TITLE ☐ Change ☐ Addition
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, with all other like empowered.

SIGNATURE:

[Signature] (PRESIDENT) 5/ /99 954-726-1474

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)