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FILED

May 13 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N96000005402 (0)

1. Corporation Name

SAINTS NETBALL AND CULTURAL CLUB, INC.



Principal Place of Business

Mailing Address

3670 NW 27TH STREET
LAUDERDALE LAKES FL 333113670 NW 27TH STREET
LAUDERDALE LAKES FL 33311-18113. Date Incorporated or Qualified
10/21/1996

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

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐ \$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

OMPHROY, MARLENE
3670 NW 27TH STREET
LAUDERDALE LAKES FL 33311

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 D ☐ DELETE
NAME OMPHROY, MARLENE
STREET ADDRESS 3670 NW 27TH STREET
CITY - ST - ZIP LAUDERDALE LAKES FL 333111.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIPTITLE D ☐ DELETE
NAME MCINTOSH, PAULINE
STREET ADDRESS 9560 GLACIA ST
CITY - ST - ZIP MIRAMAR FL 330252.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIPTITLE D ☐ DELETE
NAME DUNBAR, ALICIA
STREET ADDRESS 2123 CHAMPION WAY
CITY - ST - ZIP N LAUDERDALE FL 330683.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIPTITLE D ☐ DELETE
NAME HALL, JUDITH
STREET ADDRESS 9037 NW 25TH CT
CITY - ST - ZIP CORAL SPRINGS FL 330654.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIPTITLE D ☐ DELETE
NAME DAWKINS, LISA
STREET ADDRESS 4500 NW 36TH ST, 202
CITY - ST - ZIP LAUDERDALE LAKES FL 333195.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIPTITLE D ☐ DELETE
NAME ROGERS, HAZELLE
STREET ADDRESS 2769 NW 36TH AVE
CITY - ST - ZIP LAUDERDALE LAKES FL 333116.1 TITLE ☐ Change ☐ Addition
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: *Marlene Omphey*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR4/29/97 934-486-0818
Date Daytime Phone # 0034540

CR2E037 (9/96)