## **FILE NOW: FILING FEE IS \$61.25**

Mailing Address

7231 RADIO RD #546 NAPLES FL 34104

NONPROFIT **CORPORATION** ANNUAL REPORT

1998

Principal Place of Business

7231 RADIO RD #546 NAPLES FL 34104



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N9700002096 (2)

**GULF COAST FOOTBALL LEAGUE, INC.** 

## **FILED** Feb 27 1998 8:00am Secretary of State

to Incorporated or Qualified

04/11/1997

					59-3443648	Applied For Not Applicable
2. Principal P	Place of Business	2a. Mailing Address 26		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
City & Stat		City & State			7. Is this nonprofit corporation a hon	neowners/association? Yes 🖸 No
Zip 14	Country 25	Zip 29	Country 30	'	This corporation owes or has paid     Personal Property Tax due June 3	80. Yes 🛛 No N/A
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Reg	istered Agent
ERICKSON, LOUIS S 2301 C.R. 951, SUITE F				81 Name  82 Street Address (P.O. Box Number is Not Acceptable)		
NAPLES	S FL 34116		83	City		B5 Zip Code
office or r	to the provisions of Sections 617.0502 registered agent, or both, in the State of am familiar with, and accept the obligat	of Florida. Such change was	authorized by	the cor	I corporation submits this statement for the pu poration's board of directors. I hereby accept	rpose of changing its registered the appointment as registered
SIGNATURE	Signature, typed or printed name of registered agent	it and title if applicable (NO	TE: Registered Ag	ant signature	e required when reinstating)	DATE
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12
TITLE	Pizes. (D)	☐ DELETE	1.1 TITLE		P	Change Addition
NAME	Ron Lahmor	$\mathcal{J}$	1.2 NAME		RON LEHMAN # 546	
STREET ADDRESS	JSSI BUDIO BD SAC	$\mathcal{V}$	1.3 STREET	ADDRESS	7231 Radio Rd #546	1),0-
CITY-ST-ZIP	Wholes FL 34100	4	1.4 CITY-5	T-ZIP	naples, F1.34104	
TITLE	Vice Prair (T)	☐ DELETE	2.1 TITLE		V 1	☐ Change ☐ Addition
NAME	Too Silva	<i>'</i>	2.2 NAME		JOE SILVA	~
STREET ADDRESS	3305 5th ADE NO	り	2.3 STREET	ADDRESS	3305 SIM AVE N.W.	<i>I</i> D
CITY-ST-ZIP	NAPLES FL 341	20	2. 4 CITY-		NAPLES FL 34120	DIA.
TITLE	Sec Trues ( 1)	☐ DELETE	3.1 TITLE	F	C/T /	☐ Change ☑ Addition
NAME	Suzanue Perez		3.2 NAME		CONTRADOR CEREZ	7
	270 PRICE ST	}	3.3 STREET	ADDRESS	12-10 PRICE STREET	Din 1
CITY-ST-ZIP	NAPLES FL 341	13	3.4. CITY-		NAPLES, FL 34113	
TITLE	1100	DELETE	4.1 TITLE	U1 E.	· · · / · · · · · · · · · · · · · · · ·	Change Addition
NAME	1		4, 2 NAME			·
STREET ADDRESS			4.3 STREET	ADDRESS	•	
CITY-ST-ZIP			4.4 CITY - S			
TITLE		☐ DELETE	5.1 TITLE	n · zn		Change Addition
NAME		<del>_</del>	5.2 NAME			
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP	1		5.4 CITY - 5			
TITLE		☐ DELETE	6.1 TITLE	<u> </u>	<u> </u>	Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET	ADDRESS		
CITY-ST-ZIP	certify that the information supplied wit	h this filing does not qualify	for the exemp		I ed In Section 119.07(3)(i), Florida Statutes. I fu	urther certify that the information
indicated	I on this annual report or supplemental	annual report is true and ac	curate and th	at my sig	gnature shall have the same legal effect as if r s required by Chapter 617. Florida Statutes: a	nade under oath; that I am an

Block 12 or Block 13 If changed, or on an attachment with an address.