FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

N97000004879 (9)

| NEXT GENERATION OF RUNNERS YOUTH TRACK CLUB INC. | | | | | | | |
|--|---|-----------------------------------|---|-----------|---|--|--|
| Principal Place of Business | | Mailing Address | | | | I TOURNOUT BUE TEXAN LEGAL COUNT | |
| 9721 SW 19TH | | 3721 SW 19TH ST | 3721 SW 19TH ST GAINESVILLE FL 32608 | | | 3. Date Incorporated or Qualified | |
| GAINESVILLE F | FL 32608 | GAINESVILLE FL 32608 | | | | 08/27/1997 | |
| | | | | | | 4. FEI Number Applied For Not Applied For Not Applied For | |
| 2. Principal P | Place of Business | 2a. Mailing Address | 2a. Mailing Address | | | - 60.75 | |
| 21 | | 26 | | | 5. Certificate of Status Desired 5.75 Additional Fee Regulard | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | 6. Election Campaign Financing \$5.00 May Be | | |
| City & State | | City & State | | | Trust Fund Contribution Added to Fees 7. Is this nonprofit corporation a homeowners association? | | |
| 23 | | 28 | | | 7. Is this nonprofit corporation a nomeowners association? Yes No | | |
| Zip | Country Zip Cou | | | untry | | 8. This corporation owes or has paid the current year Intangible | |
| 24 | 25 Same and Address of Curre | 29 | 30 | т | -1-1- | Personal Property Tax due June 30. Yes No | |
| | 9. Name and Address of Curre | int Hegistered Agent | | 81 | Name | 10. Name and Address of New Registered Agent | |
| JOHNSO | ON, JACQUELINE D | | | | | | |
| 3721 SW 19TH ST | | | | 82 5 | Street Addre | ess (P.O. Box Number is Not Acceptable) | |
| | VILLE FL 32608 | | | 63 | | | |
| | | | | 84 (| City | ■ 85 Zip Code | |
| 44 Duzevant | to the provinces of Sections 617.05 | On and 647 4500 Florido Ctatu | the sheet | 1 | • | FL T | |
| office or r | egistered agent, or both, in the Stat | e of Florida. Such change was | tes, the at authorized | d by th | named corpo he corporatio | oration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered | |
| l | m fami liar with, and accept the oblig | gations of, Section 617.0503, Fi | iorida Stat | tutes. | | | |
| SIGNATURE | Signature, typed or printed name of registered as | gent and title if applicable. (NO | TE Registerer | d Agent s | signature require | od when reinstating) DATE | |
| 12. | · · · · · · · · · · · · · · · · · · · | ND DIRECTORS | 13. | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
| TITLE | PD | ☐ DELETE | 1.1 7/1 | | | ☐ Change ☐ Addition | |
| NAME Street address | JOHNSON, JACQUELINE 3721 SW 19TH ST | 1.2 NAME | | | voncec | | |
| CITY-ST-ZIP | GAINESVILLE FL 32608 | 1.3 STREET ADDRESS | | 1 | | | |
| TITLE | 10 | DELETE | 2.1 111 | | žit. | ☐ Change ☐ Addition | |
| NAME | NEWSOM, JOHN | | 2.2 NAME | | | - · - | |
| STREET ADDRESS | 3721 SW 19TH ST | | 2.3 STREET ADDRESS | | DRESS | | |
| CITY-ST-ZIP | GAINESVILLE FL 32608 | | 2. 4 CITY-ST-ZIP | | ZIP | | |
| TITLE | SD OUE CHEODY | ☐ DELETE | 3.1 TITLE | | | ☐ Change ☐ Addition | |
| NAME Street Adoress | Cue, Sherry 433 se 15th st | | 3.2 NAME 3.3 STREET ADDRESS | | OBCCC | | |
| CITY-ST-ZIP | GAINESVILLE FL 32641 | | 3.4. CITY-ST-ZIP | | | | |
| TITLE | WINDOWSEE PE GEOTT | DELETE | 4.1 TiT | | | ☐ Change ☐ Addition | |
| NAME | | | 4. 2 NA | AME | i | | |
| STREET ADDRESS | | | 4.3 STI | REET ADI | DRESS | | |
| CITY-ST-ZIP | | | 4.4 CITY-ST-ZIP | | <u>up</u> | | |
| TITLE | | ☐ DELETE | 5.1 TITLE | | | Change Addition | |
| NAME STREET ADDRESS | | | 5.2 NAME 5.3 STREET ADDRESS | | | | |
| CITY-ST-ZIP | | | P | | | | |
| TITLE | | DELETE | 54 CITY-ST-ZIP DELETE 6.1 TITLE | | UE | Change Addition | |
| NAME | | _ | 6.2 NA | | | | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | DRESS | | |

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 suppliemental 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 preceiver 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 or an attachment with an address.

334-5000

FILED

Jun 11 1998 8:00am

Secretary of State