

NONPROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N98000000370			
1. Corporation Name FLAGLER COUNTY IN-LINE HOCKEY, INC.			
Principal Place of Business P.O. BOX 354511 PALM COAST FL 32135		Mailing Address P.O. BOX 354511 PALM COAST FL 32135	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	
3. Name and Address of Current Registered Agent TOH, ERNEST M 37 BANNBURY LANE PALM COAST FL 32137			
10. Name and Address of New Registered Agent 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: <i>Ernest M. Toth</i> DATE: 9-10-99			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PT NAME: ERNEST H. TOT# STREET ADDRESS: 37 BANNBURY LN CITY-ST-ZIP: PALM COAST FL 32137		1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	
TITLE: VPT NAME: RICHARD CAMPANARO STREET ADDRESS: 43 BANNBURY LN CITY-ST-ZIP: PALM COAST FL 32137		2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	
TITLE: T NAME: ERNEST M TOT# STREET ADDRESS: 37 BANNBURY LN CITY-ST-ZIP: PALM COAST FL 32137		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP: 		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP: 		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP: 		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	

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99 OCT 13 AM 9:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

9/16/99 90008014 \$61.25

01/22/1998

4. FEI Number 59-3541476

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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: *Ernest M. Toth* DATE: **9-10-99**

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 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: *Ernest M. Toth*Date: **9-10-99** Daytime Phone: **446-2780**

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