NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N9800001899

1. Corporation Name

BRADENTON BASKETBALL BOOSTERS, INC.

Principal Place of Busin
4303 1ST STREET
SUITE 200
RRADENTON EL 34208

2. Principal Place of Business

Mailing Address

4303 1ST STREET SUITE 200

BRADENTON FL 34208

2a. Mailing Address

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

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3. Date Incorporated or Qualifed

City & State Country Country Country Country Country Country Trust Fund Contribution	Fee Required
City & State Country Country Country Country Country Country Trust Fund Contribution	ired S8.75 Additional Fee Required ncing S5.00 May Be Added to Fees
City & State Country Country Country Country Country Country Trust Fund Contribution	red Fee Required ncing \$5.00 May Be Added to Fees
Zip Country Zip Country 6. Election Campaign Finar 24 25 29 3 4 2 5 30 Trust Fund Contribution	ncing S5.00 May Be Added to Fees
Zip Country Zip Country 6. Election Campaign Finar Trust Fund Contribution	Added to Fees
	Added to Fees
	New Registered Agent -
81 Name DAVID L. BOV	ERHOF
AMERILAWYER 82 Street Address (P.O. Box Number is Not A 343 ALMERIA AVENUE	(cceptable)
	STREET
CORAL GABLES FL 33134	
84 City BRADENTON	85 Zip Code
	FL 34208
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the corporation submits this statement for the corporation is board of directors. I hereby	for the purpose of changing its registered accept the appointment as 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 agent. I am familial with, and accept the obligations of, Section 617.0503, Florida Statutes.	5 86
SIGNATURE DAVID L. BOVERHOP	4-30-17
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)	TO OFFICERS AND DIRECTORS IN 12
O) / IOC/O / W. D II/CC O)	Change Addition
NAME BOVERHOF, DAVID L 12 NAME	,
STREET ADDRESS 4303 1ST STREET 1.3 STREET ADDRESS	
CITY-ST-ZIP BRADENTON FL 34208 14 CITY-ST-ZIP 121 TIME DELETE 2.1 TIME	Change Addition
	Gliange G Addition
NAME BOVERHOF, BONNIE L 22 NAME	ĺ
STREET ADDRESS 4303 1ST STREET 23 STREET ADDRESS	
CITY-ST-ZIP BRADENTON FL 34208 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE D DELETE 3.1 TITLE	
NAME TULS, DAVID 3.2 NAME	
STREET ADDRESS 4303 1ST STREET 3.3 STREET ADDRESS	
CITY-ST-ZIP BRADENTON FL 34208 3.4. CITY-ST-ZIP	☐ Change ☐ Addition
TITLE DELETE 4.1 TITLE	C Cusude (Vocino)
NAME 4. 2 NAME	
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TITLE DELETE 5.1 TITLE	☐ Change ☐ Addition
NAME 5.2 NAME	
STREET ADDRESS 5.3 STREET ADDRESS	
CITY-ST-ZIP 5.4 CITY-ST-ZIP	Change
TITLE DELETE 6.1 TITLE	Change Addition
NAME 62 NAME	
STREET ADDRESS 6.3 STREET ADDRESS	ĺ
CITY-ST-ZIP 6.4 CITY-ST-ZIP	the Lindbar cortify that the information

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 informatic 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:

YPED OF PRINTED MANUEL HOP