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NONPROFIT
 CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # N98000005246

1. Corporation Name

FLORIDA JUNIOR HOCKEY LEAGUE, INC.

Principal Place of Business

**2300 NW CORPORATE BLVD
 SUITE 118
 BOCA RATON FL 33431**

Mailing Address

**2300 NW CORPORATE BLVD
 SUITE 118
 BOCA RATON FL 33431**



2. Principal Place of Business

21 2650 N. MILITARY TRAIL

2a. Mailing Address

26 2650 N. MILITARY TRAIL

Suite, Apt. #, etc.

22 SUITE 125

Suite, Apt. #, etc.

27 SUITE 125

City & State

23 BOCA RATON, FL

City & State

28 BOCA RATON, FL

Zip

24 33431

Country

Zip

29 33431

Country

30

3. Date Incorporated or Qualified

09/01/1998

4. FEI Number

65-0888319

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Election Campaign Financing
 Trust Fund Contribution ☐

**\$5.00 May Be
 Added to Fees**

9. Name and Address of Current Registered Agent

**GOLDSTEIN, ROBERT N
 2300 NW CORPORATE BLVD
 SUITE 118
 BOCA RATON FL 33431**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

2650 N. MILITARY TRAIL

83

SUITE 125

84 City

BOCA RATON

FL

85 Zip Code

33431

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 **Robert N. Goldstein**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/12/99

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE

NAME **GOLDSTEIN, ROBERT N**

STREET ADDRESS **2300 NW CORPORATE BLVD STE 118**

CITY-ST-ZIP **BOCA RATON FL 33431**

TITLE **D** ☐ DELETE

NAME **BAHR, RALF G**

STREET ADDRESS **P.O. BOX 3472 N/A**

CITY-ST-ZIP **BOCA RATON FL 33427**

TITLE **D** ☐ DELETE

NAME **CROWDER, TERRY**

STREET ADDRESS **P.O. BOX 290627 N/A**

CITY-ST-ZIP **PORT ORANGE FL 32129**

TITLE **D** ☐ DELETE

NAME **KLINE, HARVEY**

STREET ADDRESS **10623 NW 42ND CT**

CITY-ST-ZIP **SUNRISE FL 33351**

TITLE **D** ☒ DELETE

NAME **MUTCHLER, FRANK**

STREET ADDRESS **3218 SW 8TH AVE**

CITY-ST-ZIP **CAPE CORAL FL 33914**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

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

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

2650 N. MILITARY TRAIL, SUITE 125

**D MARTIN C. BRYCE
 5356 COBALT COURT
 CAPE CORAL, FL 33904**

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: **Robert N. Goldstein**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/12/99

Date

561-997-4002

Daytime Phone #

CR2F037 (1/98)