FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
Division of Corporations

DOCUMENT # P95000035764 (6)

GATOR BUMPER BALL, INC.

| | o 04 1998 8:00ar Secretary of State | |
|-----------|--|---|
| | | |
| Incorpora | DO NOT WRITE IN THIS SPACE | 7 |

| Principal Pla | ce of Business | Mailing Address | I LOANSEN SIR 16181 BINI ANIII ANIII BANII BANII | JII BI BIIII ABBID BIIII BIBI (BBI | | | |
|--|---|---|--|------------------------------------|--|--|--|
| 1181 S. RODGERS CIRCLE 2300 PALM BEACH LAKE #23 SUITE 300 | | | | | | | |
| #23 SUITE 300 BOCA RATON FL 33487 WEST PALM BEACH FL 33409 | | | | | DO NOT WRITE IN THIS SPACE | | |
| US | | | | | 3. Date Incorporated or Qualified 05/01/1995 | | |
| 2. Principal Place of Business 2a. Mailing Address | | | | | 4. FEI Number | Applied For | |
| 21 | | 26 | | 59-2801126 | Not Applicable | | |
| Suite, Apt. #, etc. Suite, Apt. #, etc. | | | · · · · · · | | | \$8.75 Additional | |
| 22 | | 27 | | 5. Certificate of Status Desired | Fee Required | | |
| City & Sta | ale | City & State | | , | 6. Election Campaign Financing | \$5.00 May Be | |
| 23 | | 28 | | | Trust Fund Contribution | Added to Fees | |
| — | - | | Countr | У | 8. This corporation owes or has paid the current year Intangible | | |
| 24 | 25 g. Name and Address of Curre | 29 Agent | 30 | | Personal Property Tax due June 30. 10. Name and Address of New Registere | X Yes □ No | |
| H | OFFMANN, RONALD R | ni nogistorou Agent | 81 | Name | 10, realise and readings of Hotel ringletons | - ngo | |
| | 300 PALM BEACH LAKES BLVD | | L | | (0.0.5) | | |
| 1 | UITE 300 | | 82 | Street Addr | ess (P.O. Box Number is Not Acceptable) | | |
| | EST PALM BEACH FL 33409 | | 83 | | | | |
| | | | 84 | Ca | | Tagl 7: Code | |
| | | | 64 | City | F | L 85 Zip Code | |
| 11, Pursuan | t to the provisions of Sections 607.050 | 02 and 607, 1508, Florida Statu | utes, the abov | e-named corp | oration submits this statement for the purpose ion's board of directors. I hereby accept the a | of changing its registered | |
| | am familiar with, and accept the oblig | | | | ion's board of directors. Thereby accept the a | ppolitiment as registered | |
| SIGNATURE | | | | | | | |
| 40 | Signature, typed or printed name of registured ag | eut and til e if applicable (NC ID DIRECTORS | | ent signature require | ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A | ND DIDECTORS IN 40 | |
| 12. | D | DELETE | 13. | | ADDITIONS/CHANGES TO OFFICERS A | Change Addition | |
| NAME | HOFFMANN, RONALD R | | 1.2 NAME | | | | |
| STREET ADDRESS | 10000 DIO DEI DAT | | | I ADDRESS | | | |
| CITY-ST-ZIP | DELRAY BEACH FL 33446 | | 1.4 CITY- | | | | |
| TITLE | SD | DELETE | 2.1 THTLE | | | ☐ Change ☐ Addition | |
| NAME | GOCKMAN, CARL R | | 2.2 NAME | | | | |
| STREET ADDRESS | | | 2.3 STREE | I ADDRESS | | | |
| CITY-ST-ZIP | BOCA RATON FL | | 2. 4 CITY- | ST-ZIP | | | |
| TITLE | | ☐ DELETE | 3.1 TITLE | | | Change Addition | |
| NAME | | | 3.2 NAME | | | | |
| STREET ADDRESS | | | | T ADDHESS | | | |
| CITY-ST-ZIP TITLE | | DELETE | 3.4. CiTY- | S1-ZIP | | Change Addition | |
| NAME | | occelt | 4.2 NAME | | | the state of the s | |
| STREET ADDRESS | | | | ADDRESS | | | |
| CITY-ST-ZIP | | | 4.4 CITY-5 | | | | |
| TITLE | | ☐ DELETE | 51 TITLE | | | ☐ Change ☐ Addition | |
| NAME | | | 5.2 NAME | | | | |
| STREET ADDRESS | | | 5 3 STREET | ADDRESS | | | |
| C(TY-ST-ZIP | | | 5.4 CITY-5 | ST-ZIP | | | |
| TITLE | | ☐ DELETE | 61 HILE | | | ☐ Change ☐ Addition | |
| NAME | | | 62 NAME | | | | |
| STREET ADDRESS | | | 6.3 STREE | ADDRESS | | | |
| CITY-ST-ZIP | | | 6.4 CITY-S | ST - 71P | | | |

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CICNATURE Van AD HOLLE

Paris August Part 1-28-98 5/1-991-00