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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000054498 (7)

FILED Jun 01 1998 8:00am Secretary of State

1. Corporation Name P93000034498 (7)										
FLORIDA EIGHT BALL LEAGUE, INC.										
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								District the new point of the particle of the		
Principal Place of Business Mailing Address								5,, 411	11 11 12 11 11 21	
217 CITRUS TRAIL 217 CITRUS TRAIL										
BOYNTON BEACH FL 33436 BOYNTON BEACH FL 33436-18										
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2. Principal Place of Business 2a, Mailing Address								4. FEI Number	5/01/199 <i>8</i>	pplied For
-				26				65-0594942		lot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.										Additional
22 27								5. Certificate of Status Desired		equired
City & State City & State						_		6. Election Campaign Financing	\$5.00) May Bo
23			28					Trust Fund Contribution		to Fees
Zip			Zip	h h		try		8. This corporation has liability for intangible tax under s		s 199 032.
24 25			29					Florida Statutes Yes		
9, Name and Address of Current Registered Agent						n I	Name	10, Name and Address of New Registered	Agent	
HARLAND, FRANCINE K						" '	INATHO			
217 CITRUS TRAIL BOYNTON BEACH FL 33436					8	82 Street Address (P.O. Box Number is Not Acceptable)				
l BO	INION RE	ACH FL 33438			la la	83				
)					ا ا					
		84 City			FI	85 Zip	Code			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-name								oration submits this statement for the purpose	of changing	15 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 regist agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.										
SIGNATURE										
Signature types or prelied name of registored agreet and title it applicable (NOTE Registored Agreet and title it applicable (NOTE Registored Agreet AND DIRECTORS 13.							ariupen mulangia		E DIDECTO	10.10.15
12.	PTO	OFFICENS	MO DIN CICI	DELETE	13.			ADDITIONS/CHANGES TO OF LICERS AN	Change	Addition
NAME	PETCHNER, ROBERT J				ł	1.2 NAME			Earl Guarde	
STREET ADDRESS 801. NORTH OCEAN BOULEVARD					1.3 STREET ADDRESS		IDRESS			
CITY-ST-ZIP DELRAY BEACH FL 33483							7IP			
TITLE	VSD DELETE				2 1 TITLE				Change	Addition
NAME	HARLAND, FRANCINE K				22 NAM	22 NAME				[
STREET ADDRESS	A4= 6120116 20 14				2.3 STREET ADDRESS					
CITY-ST-ZIP	BOYNTON BEACH FL 33438				2.4 CITY	(- \$T-	ZIP			
TITLE	L. DELETE			3 1 TITLE	F			Change	Addition	
NAME					3.2 NAM	E		•		
STREET ADDRESS					3.3 STRE	ET AD	ORESS			1
CITY-ST-ZIP					3.4. CITY		ZIP			
TITLE				DELETE	4.1 TITLE				☐ Change	Addition
NAME					4. 2 NAM					1
STREET ADDRESS					4.3 STRE					1
CITY-ST-ZIP				DELETE	4.4 CITY		?IP		Channe	Addition
TITLE				DELETE	5 1 TITLE			2000025458 -06/03/38010520	Linange Linange	L AUDITION
NAME STREET ADDRESS					5.2 NAM 5.3 STRI		nacce	-06/03/38010520	17	1
CITY-ST-ZIP					5.3 STRE 5.4 CITY			***150.00		
TITLE		4		DELETE	6.1 BTLS		in		Change	Addition
NAME					6.2 NAM				<u></u>	
STREET ADDRESS					6.3 STRE		DRESS		9	1/1
CITY-ST-ZIP					6.4 City				-	110

14. I do 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 eath; 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.

CIONATURE S

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4-29-98 /54/272-2612