2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2004
Secretary of State

DOCUMENT# N02000004109

Entity Name: TOP GUN ALL-STAR CHEERLEADING BOOSTER CLUB, INC.

Current Principal Place of Business:

4805 ARNOLD AVE STE 201
NAPLES, FL 34104

New Principal Place of Business:

4085 ARNOLD AVE
STE 201
NAPLES, FL 34104

Current Mailing Address:

4805 ARNOLD AVE STE 201
NAPLES, FL 34104

New Mailing Address:

4085 ARNOLD AVE
SUITE 201
NAPLES, FL 34104

FEI Number: 04-3671672 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEHMANN, LESLIE A
236 BACKWATER CT
NAPLES, FL 34119 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: LEHMANN, LESLIE
Address: 236 BACKWATER CT.
City-St-Zip: NAPLES, FL 34119

Title: D ( ) Delete
Name: BENCAMP, JOHN
Address: 4085 ARNOLD AVE. #201
City-St-Zip: NAPLES, FL 34104

Title: D ( ) Delete
Name: ROSARIO, KRISTEN
Address: 11225 SW 132 CT. W
City-St-Zip: MIAMI, FL 33186

Title: D ( ) Delete
Name: ROSARIO, VICTOR
Address: 11225 SW 132 CT. W
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: BENCOMO, JOHN
Address: 4085 ARNOLD AVE. #201
City-St-Zip: NAPLES, FL 34104

Title: D (X) Change ( ) Addition
Name: ROSARIO, KRISTEN
Address: 13135 SW 124TH AVE.
City-St-Zip: MIAMI, FL 33186

Title: D (X) Change ( ) Addition
Name: ROSARIO, VICTOR
Address: 13135 SW 124TH AVE.
City-St-Zip: MIAMI, FL 33186

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LESLIE A. LEHMANN D 03/16/2004
Electronic Signature of Signing Officer or Director — Date