2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004371

FILED Apr 21, 2007 Secretary of State

Entity Name: PALMETTO RIDGE BOOSTER CLUB, INC.

Current Principal Place of Business: New Principal Place of Business:

1655 VICTORY LANE NAPLES, FL 34120

Current Mailing Address: New Mailing Address:

1655 VICTORY LANE NAPLES, FL 34120

FEI Number: 11-3718339 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

THRUSHMAN, STELLA

2811 2ND STREET NW

NAPLES, FL 34120 US

THOMAS, MICHAEL D
660 24TH AVENUE NW.
NAPLES, FL 34120 US

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: MICHAEL D THOMAS 04/21/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: VP () Delete Title: VP (X) Change () Addition

 Name:
 PHILLIPS, DEBRA
 Name:
 LITKA, PHYLLIS

 Address:
 304 15TH STREET NW
 Address:
 2940 2ND STREET NE.

 City-St-Zip:
 NAPLES, FL 34120
 City-St-Zip:
 NAPLES, FL 34120

Title: VP () Delete Title: VP (X) Change () Addition Name: CLAWSON, TINA Name: ECKHART, JANET

 Address:
 315 21ST STREET SW
 Address:
 3885 52ND
 AVENUE
 NE.

 City-St-Zip:
 NAPLES, FL
 34117
 City-St-Zip:
 NAPLES, FL
 34120

Title: T () Delete Title: T (X) Change () Addition
Name: THRUSHMAN, STELLA Name: THOMAS, MICHAEL D

Address: 2811 2ND STREET NW Address: 660 24TH AVENUE NW.
City-St-Zip: NAPLES, FL 34120 City-St-Zip: NAPLES, FL 34120

 $\label{eq:title:P} {\sf Title:} \qquad {\sf P} \qquad (\) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf S} \qquad ({\sf X}) \, {\sf Change} \, (\) \, {\sf Addition}$

 Name:
 CRABTREE, MARYANNE
 Name:
 SLABACH, KATHY

 Address:
 3571 4TH AVE NE
 Address:
 370 7TH STREET SW.

 City-St-Zip:
 NAPLES, FL 34120
 City-St-Zip:
 NAPLES, FL 34117

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: MICHAEL D THOMAS T 04/21/2007