

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004445

FILED
Apr 08, 2009
Secretary of State

Entity Name: CYPRESS BAY CHEER BOOSTER CLUB, INC.

Current Principal Place of Business:

18600 VISTA PARK BLVD
WESTON, FL 33332

New Principal Place of Business:

Current Mailing Address:

6211 SW 166 AVENUE
SOUTHWEST RANCHES, FL 33331

New Mailing Address:

FEI Number: 20-1083856

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEEBER, AUDREY A T
6211 SW 166 AVENUE
SOUTHWEST RANCHES, FL 33331 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: P () Delete
Name: YANES, MARY P
Address: 16730 DIAMOND DR.
City-St-Zip: WESTON, FL 33331 US

Title: VP () Delete
Name: TRUMP, BARBARA VP-V
Address: 16116 OPAL CREEK DRIVE
City-St-Zip: WESTON, FL 33331 US

Title: VP () Delete
Name: BRESLOW, SUE VP-JV
Address: 4027 CROSSBILL LANE
City-St-Zip: WESTON, FL 33331 US

Title: VP () Delete
Name: BAKER, ALYSON VP-BB
Address: 1518 CORONADO ROAD
City-St-Zip: WESTON, FL 33327 US

Title: T () Delete
Name: SEEBER, AUDREY T
Address: 6211 SW 166 AVENUE
City-St-Zip: SOUTHWEST RANCHES, FL 33331

Title: S () Delete
Name: SJOBERG, LOURDES S
Address: 1385 BANYAN WAY
City-St-Zip: WESTON, FL 33327

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: AUDREY SEEBER

T

04/08/2009

Electronic Signature of Signing Officer or Director

Date