2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2007
Secretary of State

DOCUMENT# N04000008081

Entity Name: LAKE MARY LACROSSE BOOSTER CLUB, INC.

Current Principal Place of Business:

147 EDINBURG COURT
LAKE MARY, FL 32746

New Principal Place of Business:

6202 HEDGESPARROWS LANE
SANFORD, FL 32771

Current Mailing Address:

147 EDINBURG COURT
LAKE MARY, FL 32746

New Mailing Address:

6202 HEDGESPARROWS LANE
SANFORD, FL 32771

FEI Number: 27-0103220 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WEBER, ANITA R MRS.
147 EDINBURG COURT
LAKE MARY, FL 32746 US

Name and Address of New Registered Agent:

WEBER, ANITA R MRS.
6202 HEDGESPARROWS
SANFORD, FL 32771 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: _____ 04/22/2007
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DIR ( ) Delete
Name: WEBER, ANITA R
Address: 147 EDINBURG COURT
City-St-Zip: LAKE MARY, FL 32746

Title: DIR ( ) Delete
Name: BREEN, DIANE
Address: 3529 LEGACY HILLS COURT
City-St-Zip: LONGWOOD, FL 32779

Title: DIR ( ) Delete
Name: LANUTO, FRANK
Address: 309 OAKWOOD COURT
City-St-Zip: LAKE MARY, FL 32746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change ( ) Addition
Name: WEBER, ANITA R
Address: 6202 HEDGESPARROWS LANE
City-St-Zip: SANFORD, FL 32771

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 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: ANITA R. WEBER DIR. 04/22/2007
Electronic Signature of Signing Officer or Director — Date