

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000491

FILED
May 17, 2006
Secretary of State

Entity Name: THE 9.0 BOOSTER CLUB, INC

Current Principal Place of Business:

4603-B SHIREY AVENUE
JACKSONVILLE, FL 32210 US

New Principal Place of Business:

Current Mailing Address:

4603-B SHIREY AVENUE
JACKSONVILLE, FL 32210 US

New Mailing Address:

FEI Number: 20-2189397 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

JONES, TAMMY
6596 ARANCIO DRIVE W
JACKSONVILLE, FL 32244 US

Name and Address of New Registered Agent:

INGRAM, TAMMY
8258 HAMDEN CIRCLE WEST
JACKSONVILLE, FL 32244 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: TAMMY INGRAM

05/17/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JONES, TAMMY
Address: 6596 ARANCIO DRIVE W
City-St-Zip: JACKSONVILLE, FL 32244 US

Title: VP () Delete
Name: POWERS, BETTY
Address: 15036 NORMANDY BLVD
City-St-Zip: JACKSONVILLE, FL 32234 US

Title: SEC () Delete
Name: ALLEN, WANDA
Address: 7550 FALCON TRACE DRIVE W
City-St-Zip: JACKSONVILLE, FL 32222 US

Title: TRES () Delete
Name: MCCAULEY, TAMMY
Address: 6643 RIPPLING WAVE CT
City-St-Zip: JACKSONVILLE, FL 32244 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DUGGAN, LAURY
Address: 4603-B SHIREY AVENUE
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: VP (X) Change () Addition
Name: POWERS, BETTY
Address: 4603-B SHIREY AVENUE
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: SEC (X) Change () Addition
Name: JOHNSON, SHERRY
Address: 4603-B SHIREY AVENUE
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: TRES (X) Change () Addition
Name: INGRAM, TAMMY
Address: 4603-B SHIREY AVENUE
City-St-Zip: JACKSONVILLE, FL 32210 US

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: TAMMY INGRAM

TRES

05/17/2006

Electronic Signature of Signing Officer or Director

Date