

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 06, 2007  
Secretary of State**

DOCUMENT# N51064

Entity Name: LEON CREW BOOSTERS, INC.

**Current Principal Place of Business:**

PO BOX 38154  
TALLAHASSEE, FL 32315 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 38154  
TALLAHASSEE, FL 32315 US

**New Mailing Address:**

FEI Number: 59-3222198      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MAIDA, MARY P  
1306 RACHEL LANE  
TALLAHASSEE, FL 32308 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: PD ( ) Delete  
Name: MAIDA, MARY  
Address: 1306 RACHEL LANE  
City-St-Zip: TALLAHASSEE, FL 32308 US

Title: VDP ( ) Delete  
Name: SMITH, JILL  
Address: 3042 HAWKSGLLEN  
City-St-Zip: TALLAHASSEE, FL 32312 US

Title: TD ( ) Delete  
Name: MINARDI, CHRISTINE  
Address: 512 WILLIAMS ST.  
City-St-Zip: TALLAHASSEE, FL 32303 US

**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:

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: CHRISTINE MINARDI

TD

01/06/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date