2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N51064

FILED Jul 09, <u>2</u>007 Secretary of State

Entity Name: LEON CREW BOOSTERS, INC.

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

PO BOX 38154 512 WILLIAMS STREET TALLAHASSEE, FL 32315 US TALLAHASSEE, FL 32315

Current Mailing Address: New Mailing Address:

PO BOX 38154 PO BOX 38154

TALLAHASSEE, FL 32315 US TALLAHASSEE, FL 32315

FEI Number: 59-3222198 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:

MAIDA, MARY P MINARDI, CHRISTINE A 1306 RACHEL LANE 512 WILLIAMS STREET TALLAHASSEE, FL 32308 TALLAHASSEE, FL 32303 US 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: CHRISTINE A. MINARDI 07/09/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PRES () Delete (X) Change () Addition MAIDA, MARY Name: Name:

CHILES, MARY 1306 RACHEL LANE Address: 3030 HAWKS GLEN Address:

City-St-Zip: TALLAHASSEE, FL 32308 US City-St-Zip: TALLAHASSEE, FL 32312 US

Title: **VDP** () Delete Title: SECR (X) Change () Addition

CRABTREE, ELLEN SMITH, JILL Name: Name: Address: 3042 HAWKSGLEN Address: 181 ROSEHILL DRIVE City-St-Zip: TALLAHASSEE, FL 32312 US City-St-Zip: TALLAHASSEE, FL 32312 US

Title: () Delete Title: **TREA** (X) Change () Addition

MINARDI, CHRISTINE MINARDI, CHRISTINE A Name: Name: 512 WILLIAMS ST. Address: Address: 512 WILLIAMS STREET City-St-Zip: TALLAHASSEE, FL 32303 US City-St-Zip: TALLAHASSEE, FL 32303 US

Title: () Delete Title: **PREL** () Change (X) Addition

Name: Name: SNOWDEN, LEE

3609 UNCLE GLOVER ROAD Address: Address:

City-St-Zip: City-St-Zip: TALLAHASSEE, FL 32312

Title: () Delete Title: () Change (X) Addition ANDERSON, WAYNE Name: Name:

3424 MONITOR LANE Address: Address: City-St-Zip: City-St-Zip: TALLAHASSEE, FL 32312

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

MAIDE, MARY Name: Name: Address: Address: 1306 RACHEL LANE TALLAHASSEE, FL 32308 City-St-Zip: 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: CHRISTINE A MINARDI **TREA** 07/09/2007