

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2006
Secretary of State

DOCUMENT# N97000005179

Entity Name: PAUL R. WHARTON SR. HIGH SCHOOL ATHLETIC BOOSTER CLUB, INC.

Current Principal Place of Business:

New Principal Place of Business:

20150 BRUCE B. DOWNS BLVD.
TAMPA, FL 33647

Current Mailing Address:

New Mailing Address:

9108 WOODRIDGE RUN DRIVE
TAMPA, FL 33647 US

FEI Number: 59-3467400 **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:

WOODEN, MONICA B
9108 WOODRIDGE RUN DRIVE
TAMPA, FL 33647 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WOODEN, MONICA B
Address: 9108 WOODRIDGE RUN DRIVE
City-St-Zip: TAMPA, FL 33647

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

Title: VP () Delete
Name: DEBORAH, LI
Address: 17814 GREEN WILLOW DRIVE
City-St-Zip: TAMPA, FL 33647

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

Title: D () Delete
Name: BURCHFIELD, KAREN
Address: 10154 WHISPER POINTE DRIVE
City-St-Zip: TAMPA, FL 33647

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

Title: T () Delete
Name: CALVIN, FAITH
Address: 15930 ELLSWORTH DRIVE
City-St-Zip: TAMPA, FL 33647

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

Title: D () Delete
Name: NEWTON, LAURA
Address: 230 CULBREATH ROAD
City-St-Zip: BROOKSVILLE, FL 34602

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

Title: D () Delete
Name: TAYLOR, CHRISTINE
Address: 10110 QUEENS PARK DRIVE
City-St-Zip: TAMPA, FL 33647

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: MONICA WOODEN

P

01/25/2006

Electronic Signature of Signing Officer or Director

Date