

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000005839

Entity Name: BOBCAT CHEERLEADING BOOSTER CLUB, INC.**Current Principal Place of Business:**5601 CARRIAGE LANE
DAVIE, FL 33331**Current Mailing Address:**5601 CARRIAGE LANE
DAVIE, FL 33331 US**FEI Number: 27-0367616****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**STEPNIEWSKI, DONNA
5601 CARRIAGE LANE
DAVIE, FL 33331 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: DONNA STEPNIEWSKI****04/30/2014**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D/P
Name KUHNS, TAMMY
Address 1371 SW 181 AVENUE
City-State-Zip: PEMBROKE PINES FL 33029

Title D/VP, 1
Name BARNES, KAREN
Address 1090 NW 192ND AVENUE
City-State-Zip: PEMBROKE PINES FL 33029

Title WEB
Name HYDE, BOBBI
Address 16321 STIRLING ROAD
City-State-Zip: SOUTHWEST RANCHES FL 33331

Title SGT. OF ARMS
Name PRISTAS, DENISE
Address 20441 NW 4 ST
City-State-Zip: PEMBROKE PINES FL 33029

Title D/T
Name STEPNIEWSKI, DONNA
Address 5601 CARRIAGE LANE
City-State-Zip: DAVIE FL 33331

Title SEC
Name REYNOLDS, KIMBERLY
Address 331 SW 194TH AVENUE
City-State-Zip: PEMBROKE PINES FL 33029

Title VP 2
Name SAMMARCO, MARY
Address 2312 NW 192 AVENUE
City-State-Zip: PEMBROKE PINES FL 33029

I hereby 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 all other like empowered.

SIGNATURE: DONNA STEPNIEWSKI**TREASURER****04/30/2014**

Electronic Signature of Signing Officer/Director Detail

Date