

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000002708

**Entity Name:** WGV ATHLETICS BOOSTER CLUB INC**Current Principal Place of Business:**135 CENTER PLACE WAY  
SAINT AUGUSTINE, FL 32095**Current Mailing Address:**135 CENTER PLACE WAY  
SAINT AUGUSTINE, FL 32095 US**FEI Number:** 46-1119449**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BATTEN, TRACEY  
135 CENTER PLACE WAY  
SAINT AUGUSTINE, FL 32095 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:** TRACEY BATTEN

01/24/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                             |
|-----------------|-----------------------------|
| Title           | PRESIDENT                   |
| Name            | ROBOR, JENNIFER             |
| Address         | 135 CENTER PLACE WAY<br>204 |
| City-State-Zip: | SAINT AUGUSTINE FL 32095    |

|                 |                          |
|-----------------|--------------------------|
| Title           | SECRETARY                |
| Name            | CONNOLEY, ALIZA          |
| Address         | 135 CENTER PLACE WAY     |
| City-State-Zip: | SAINT AUGUSTINE FL 32095 |

|                 |                       |
|-----------------|-----------------------|
| Title           | TREASURER             |
| Name            | BATTEN, TRACEY        |
| Address         | 135 CENTER PLACE WAY  |
| City-State-Zip: | ST AUGUSTINE FL 32095 |

|                 |                          |
|-----------------|--------------------------|
| Title           | VP                       |
| Name            | CONNOLEY, ALIZA          |
| Address         | 135 CENTER PLACE WAY     |
| City-State-Zip: | SAINT AUGUSTINE FL 32095 |

*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:** TRACEY BATTEN**TREASURER**

01/24/2023

Electronic Signature of Signing Officer/Director Detail

Date