

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005198

Entity Name: SEMINOLE HIGHSCHOOL BASKETBALL BOOSTERS, INC.

Current Principal Place of Business:

8401 131ST ST. N.
SEMINOLE, FL 33776

Current Mailing Address:

8401 131ST ST. N.
SEMINOLE, FL 33776 US

FEI Number: 59-3341458

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COWAN, ALLEN MR
11615 GROVE ST.
SEMINOLE, FL 33772 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

Officer/Director Detail :

| | | | |
|-----------------|--------------------------|-----------------|--------------------|
| Title | PRES | Title | VP |
| Name | COWAN, ALLEN | Name | MAHONEY, JAMES |
| Address | 11615 GROVE STREET | Address | 8193 128TH STREET |
| City-State-Zip: | SEMINOLE FL 33772 | City-State-Zip: | SEMINOLE FL 33776 |
| | | | |
| Title | SEC | Title | TR |
| Name | FISH, CASSANDRA | Name | FRAIN, KATHRYN P |
| Address | 16209 1ST STREET EAST | Address | 12865 HIBISCUS AVE |
| City-State-Zip: | REDINGTON BEACH FL 33708 | City-State-Zip: | SEMINOLE FL 33776 |

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: KATHRYN P FRAIN

TREASURER

04/07/2013

Electronic Signature of Signing Officer/Director Detail

Date