

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000005179

**FILED**  
**Mar 24, 2021**  
**Secretary of State**  
**3388235465CC**

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

**Current Principal Place of Business:**

20150 BRUCE B. DOWNS BLVD.  
TAMPA, FL 33647

**Current Mailing Address:**

20150 BRUCE B. DOWNS BLVD.  
TAMPA, FL 33647 US

**FEI Number: 59-3467400**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

WHARTON HIGH SCHOOL ATHLETIC BOOSTER CLUB  
20150 BRUCE B. DOWNS BLVD.  
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

**Officer/Director Detail :**

Title           TREASURER  
Name           MCDONALD, PAULA  
Address        20150 BRUCE B. DOWNS BLVD.  
City-State-Zip: TAMPA FL 33647

Title           P  
Name           GODBOLD, FRANK  
Address        20150 BRUCE B. DOWNS BLVD.  
City-State-Zip: TAMPA FL 33647

Title           VP  
Name           GODBOLD, MARIA  
Address        20150 BRUCE B. DOWNS BLVD.  
City-State-Zip: TAMPA FL 33647

Title           S  
Name           ARROYO, WENDY  
Address        20150 BRUCE B. DOWNS BLVD.  
City-State-Zip: TAMPA FL 33647

Title           ASST. TREASURER  
Name           EHRHARD, SHANN  
Address        20150 BRUCE B. DOWNS BLVD.  
City-State-Zip: TAMPA FL 33647

*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: SHANNON EHRHARD**

**ASST. TRES**

**03/24/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date