2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737138

FILED Jan 18, 2004 Secretary of State

Entity Name: CITRUS PARK BILLS' BOOSTER CLUB, INC.

Current Principal Place of Business: New Principal Place of Business: 7608 ALEMA STREET TAMPA, FL 33625 **Current Mailing Address: New Mailing Address:** P.O. BOX 340805 TAMPA, FL 33694 US **FEI Number:** FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MCCLAIN, TIM 6110 COGNAC CIRCLE LUTZ, FL 33558 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: () Change () Addition () Delete CHESNUT, ARTHUR Name: Name: Address: 13811 PATHFINDER DRIVE Address: City-St-Zip: TAMPA, FL 33624 City-St-Zip: Title: ADD () Delete Title: () Change () Addition Name: MCCLAIN, TIM Name: Address: 6110 COGNAC CIRCLE Address: City-St-Zip: LUTZ, FL 33558 City-St-Zip: Title: PRES () Delete Title: () Change () Addition AHLES, DENISE Name: Name: Address: 1445 HOUNDS HOLLOW CT Address: City-St-Zip: LUTZ. FL 33549 City-St-Zip: Title: SY () Delete Title: () Change () Addition Name: JENNINGS, WENDY Name: 6224 FROST DRIVE Address: Address: City-St-Zip: TAMPA, FL 33625 City-St-Zip: Title: (X) Delete Title: () Change () Addition BLUM, JEFFREY Name: Name: 11042 STREAMSIDE DRIVE Address: Address: City-St-Zip: TAMPA, FL 33624 City-St-Zip: Title: (X) Delete Title: () Change () Addition MOREHOUSE, NEIL Name: Name: Address: 5115 BRYNN MAWR DRIVE Address: TAMPA, FL 33624 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TIM MCCLAIN ADD 01/18/2004