2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2006
Secretary of State

DOCUMENT# N00000000752

Entity Name: JOHN HOPKINS THESPIAN BOOSTER CLUB, INC.

Current Principal Place of Business:

701 16TH STREET SOUTH
SAINT PETERSBURG, FL 33705

New Principal Place of Business:

Current Mailing Address:

PO BOX 12084
SAINT PETERSBURG, FL 33733

New Mailing Address:

FEI Number: 59-3623033 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROGOWSKI, & KOCH
100 S ASHLEY SUITE 1290
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

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:

Title: PD ( ) Delete
Name: NICKENS, MARY B
Address: 701 16TH STREET SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: SD ( ) Delete
Name: ROSEN, JANET
Address: 701 16TH STREET SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: TD ( ) Delete
Name: GAESSER, NANCY
Address: 701 16TH STREET SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33705

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: ARKY, ELLEN
Address: 701 16TH STREET SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: SD (X) Change ( ) Addition
Name: NICKENS, BRIDGET
Address: 701 16TH STREET SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: TD (X) Change ( ) Addition
Name: VOLLAND, BONNIE L
Address: 701 16TH STREET SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33705

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: BONNIE L VOLLAND TD 02/02/2006

Electronic Signature of Signing Officer or Director — Date