

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002207

FILED
Mar 13, 2008
Secretary of State

Entity Name: PALM HARBOR UNIVERSITY HIGH SCHOOL CENTER FOR WELLNESS AND MEDICAL PROFESSIONS BOOSTER CLUB, INC.

Current Principal Place of Business:

1900 OMAHA STREET
PALM HARBOR, FL 34683

New Principal Place of Business:

Current Mailing Address:

P O BOX 1009
CRYSTAL BEACH, FL 34681

New Mailing Address:

FEI Number: 59-3714749

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WARREN, LUCINDA J
513 N. MAYO ST
CRYSTAL BEACH, FL 34681 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: D/P () Delete
Name: WARREN, LUCINDA J
Address: P O BOX 1009
City-St-Zip: CRYSTAL BEACH, FL 34681

Title: D/S () Delete
Name: KAGAY, MARCIA
Address: 2299 LAGOON DRIVE
City-St-Zip: DUNEDIN, FL 34698

Title: D/T () Delete
Name: MAGUIRE, SUSAN
Address: 2027 SWAN LANE
City-St-Zip: PALM HARBOR, FL 34683

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: SUSAN A. MAGUIRE

D/T

03/13/2008

Electronic Signature of Signing Officer or Director

Date