## 2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# N00000002207

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Entity Name: PALM HARBOR UNIVERSITY HIGH SCHOOL CENTER FOR WELLNESS AND MEDICAL PROFESSIONS

BOOSTER CLUB, INC.

Current Principal Place of Business: New Principal Place of Business:

1900 OMAHA STREET PALM HARBOR, FL 34683

Current Mailing Address: New Mailing Address:

P O BOX 1009 1900 OMAHA STREET CRYSTAL BEACH, FL 34681 PALM HARBOR, FL 34683

FEI Number: 59-3714749 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

WARREN, LUCINDA J
513 N. MAYO ST
CRYSTAL BEACH, FL 34681 US
LITTLE, TRUDY
1734 CASEY JONES COURT
CLEARWATER, FL 33765 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: TRUDY LITTLE 08/18/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/P ( ) Delete Title: D/P (X) Change ( ) Addition

Name: WARREN, LUCINDA J Name: LITTLE, TRUDY

Address: P O BOX 1009 Address: 1734 CASEY JONES COURT
City-St-Zip: CRYSTAL BEACH, FL 34681 City-St-Zip: CLEARWATER, FL 33765

Title: D/S ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 KAGAY, MARCIA
 Name:

 Address:
 2299 LAGOON DRIVE
 Address:

 City-St-Zip:
 DUNEDIN, FL 34698
 City-St-Zip:

 $\label{eq:title:D/T} \mbox{Title:} \mbox{D/T} \mbox{() Delete} \mbox{Title:} \mbox{D/T} \mbox{(X) Change () Addition}$ 

 Name:
 MAGUIRE, SUSAN
 Name:
 SOURBEER, JANET

 Address:
 2027 SWAN LANE
 Address:
 625 POINSETTIA ROAD

 City-St-Zip:
 PALM HARBOR, FL 34683
 City-St-Zip:
 BELLEAIR, FL 33756

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: TRUDY LITTLE PRES 08/18/2008