2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 21, 2005 08:00 AM DOCUMENT # N00000003642 **Secretary of State** 1. Entity Name DIXIE HOLLINS HIGH SCHOOL BASEBALL BOOSTERS, INC. Mailing Address Principal Place of Business 3198 - 56TH ST. N. 3198 - 56TH ST. N. SAINT PETERSBURG FL 33710 SAINT PETERSBURG FL 33710 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) 4. FEI Number Applied For City & State City & State 59-3691291 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CRANMER, KEVIN Street Address (P.O. Box Number is Not Acceptable) 3198 - 56TH ST. N. ST. PETERSBURG FL 33710 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2005 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. PD U00000238733 □ ^{change} 02/22/05-80012-019 61.25 Addition Addition TITLE ☐ Delete CRANMER, KEVIN NAME 3198 - 56TH ST. N. STREET ADDRESS STREET ADDRESS SAINT PETERSBURG FL 33710 CHY-SI-7P CITY-ST-ZIP ☐ Change Addition TITLE Deiete HILE CRANMER, ANGEL NAME NAME 3198 - 56TH ST. N. STREET ADDRESS STREET ADDRESS SAINT PETERSBURG FL 33710 CITY-ST-ZIP CHY-Si-ZIE Change Addition Delete TITLE BLACKWELL, HEATHER NAME 5340 43RD TERR N STREET ADDRESS STREET ADDRESS SAINT PETERSBURG FL 33709 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition flire TITLE Delete CRANE, JOHN NAME NAME 10632 BLOSSOM LAKE DR STREET ADDRESS STREET ADDRESS SEMINOLE FL 33772 CITY-ST-ZIP CITY-ST-7IP ☐ Addition Delete ☐ Change 7/11/5 NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition THE RILLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-ST-ZIP

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12. I hereby certify that the information supplied with this filling does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

SIGNATURE

SIGNATURE

Deal Type or PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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