2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003642

FILED Apr 29, 2007 Secretary of State

Entity Name: DIXIE HOLLINS HIGH SCHOOL BASEBALL BOOSTERS, INC.

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

5080 45TH AVE NORTH 4940 62ND STREET NORTH SAINT PETERSBURG, FL 33709 SAINT PETERSBURG, FL 33709

Current Mailing Address: New Mailing Address:

5080 45TH AVE NORTH 4940 62ND STREET NORTH SAINT PETERSBURG, FL 33709 SAINT PETERSBURG, FL 33709

FEI Number: 59-3691291 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

STATON, TOM HANSEN, RAY

5080 45TH AVE NORTH 3145 62ND STREET NORTH

ST. PETERSBURG, FL 33709 US US ST. PETERSBURG, FL 33710

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: RAY HANSEN 04/29/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition STATON, TOM HANSEN, RAY Name: Name:

5080 45TH AVENUE NORTH Address: 3145 62ND STREET NORTH Address: City-St-Zip: SAINT PETERSBURG, FL 33709 City-St-Zip: SAINT PETERSBURG, FL 33710

(X) Change () Addition Title: VD () Delete Title: VD

CONARD, TODD Name: NEVERLINE, DAVE Name:

Address: 6101 37TH AVENUE NORTH Address: 3140 57TH AVENUE NORTH City-St-Zip: SAINT PETERSBURG, FL 33710 City-St-Zip: SAINT PETERSBURG, FL 33714

Title: () Delete Title: () Change () Addition

GARRAND, CAROLYN Name: Name: 5500 52ND AVENUE NORTH Address: Address: City-St-Zip: KENNETH CITY, FL 33709 City-St-Zip:

() Delete Title: TD Title: () Change () Addition

WESTLUND, LORI Name: Name: 7073 35TH TERRACE NORTH Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33710 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: LORI WESTLUND TD 04/29/2007