

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003642

FILED
Apr 20, 2009
Secretary of State

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

Current Principal Place of Business:

4940 62ND STREET NORTH
SAINT PETERSBURG, FL 33709

New Principal Place of Business:

Current Mailing Address:

4940 62ND STREET NORTH
SAINT PETERSBURG, FL 33709

New Mailing Address:

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

Name and Address of Current Registered Agent:

HANSEN, RAY
3145 62ND STREET NORTH
ST. PETERSBURG, FL 33710 US

Name and Address of New Registered Agent:

GAHAN, LYNN
4120 69 AV N
PINELLAS PARK, FL 33781 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: LYNN GAHAN

04/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HANSEN, RAY
Address: 3145 62ND STREET NORTH
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: VD () Delete
Name: NEVERLINE, DAVE
Address: 3140 57TH AVENUE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33714

Title: SD () Delete
Name: KELLER, DONNA
Address: 7771 DOVER COURT
City-St-Zip: ST. PETERSBURG, FL 33709

Title: TD () Delete
Name: CONARD, VICKI
Address: 6101 37TH AVENUE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33710

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GAHAN, LYNN
Address: 4120 69 AV N
City-St-Zip: PINELLAS PARK, FL 33781

Title: VD (X) Change () Addition
Name: JEANNIE, HARRIS
Address: 5019 40 AV N
City-St-Zip: SAINT PETERSBURG, FL 33709

Title: SD (X) Change () Addition
Name: WILCOX, SHERRY
Address: 5275 62 ST NO #227
City-St-Zip: KENNETH CITY, FL 33709

Title: TD (X) Change () Addition
Name: BEUM, VICKEY L
Address: 5229 36 AV N
City-St-Zip: SAINT PETERSBURG, FL 33710

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: LYNN GAHAN

PD

04/20/2009

Electronic Signature of Signing Officer or Director

Date