


**2006 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 17, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N00000006994</b> 1. Entity Name <b>THE LAKEWOOD RANCH ATHLETIC BOOSTER CLUB, INC.</b>	
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Principal Place of Business <b>5500 LAKEWOOD RANCH BLVD BRADENTON, FL 34211</b>	Mailing Address <b>5500 LAKEWOOD RANCH BLVD BRADENTON, FL 34211</b>
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**DO NOT WRITE IN THIS SPACE**



01102006 No Chg-NP CR2E037 (11/05)

4. FEI Number <b>65-1055287</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

6. Name and Address of Current Registered Agent  
  
**NIEVES, MIQUEL  
5500 LAKEWOOD RANCH BLVD.  
BRADENTON, FL 34211**

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IN THIS SPACE**

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

<b>Filing Fee is \$61.25 Due by May 1, 2006</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HYMA, DENNIS 5500 LAKEWOOD RANCH BLVD BRADENTON, FL 34202
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD KIRSCH, JANA 5500 LAKEWOOD RANCH BLVD BRADENTON, FL 34202
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD NIEVES, MIQUEL 5500 LAKEWOOD RANCH BLVD BRADENTON, FL 34202
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

<b>SIGNATURE:</b>  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<b>1-12-06</b> <small>Date</small>	<small>Daytime Phone #</small>
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