

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007405

FILED  
Mar 30, 2009  
Secretary of State

Entity Name: ENCHANTERS BOOSTER CLUB, INC.

## Current Principal Place of Business:

15255 SW 96 STREET  
MIAMI, FL 33196

## New Principal Place of Business:

## Current Mailing Address:

15255 SW 96 STREET  
MIAMI, FL 33196

## New Mailing Address:

FEI Number: 65-1059085

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JENKINS, PATRICE  
15937 SW 103 LANE  
MIAMI, FL 33196 US

## Name and Address of New Registered Agent:

ARAUZ, IRIS  
15255 SW 96 STREET  
MIAMI, FL 33196 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: IRIS ARAUZ

03/30/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: CAMPILLO, CAROLINA  
Address: 14721 SW 173 STREET  
City-St-Zip: MIAMI, FL 33187

Title: CP ( ) Delete  
Name: JENKINS, PATRICE  
Address: 15937 SW 103 LANE  
City-St-Zip: MIAMI, FL 33196

Title: S ( ) Delete  
Name: VILLAMIZAR, LILIAN  
Address: 15621 SW 100 TERRACE  
City-St-Zip: MIAMI, FL 33196

Title: T (X) Delete  
Name: MENESES, PATRICIA  
Address: 14776 SW 101 TERRACE  
City-St-Zip: MIAMI, FL 33196

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: ARAUZ, IRIS  
Address: 15255 SW 96 STREET  
City-St-Zip: MIAMI, FL 33196

Title: S (X) Change ( ) Addition  
Name: LOPEZ, ANGELA  
Address: 15255 SW 96 STREET  
City-St-Zip: MIAMI, FL 33196

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: IRIS ARAUZ

T

03/30/2009

Electronic Signature of Signing Officer or Director

Date