2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 28, 2008
Secretary of State

DOCUMENT# N00000007706

Entity Name: TAKE NOTE BOOSTERS INC.

Current Principal Place of Business:

C/O TRAFALGAR MIDDLE SCHOOL
2120 TRAFALGAR PKW
CAPE CORAL, FL 33991

New Principal Place of Business:

Current Mailing Address:

C/O TRAFALGAR MIDDLE SCHOOL
2120 TRAFALGAR PKW
CAPE CORAL, FL 33991

New Mailing Address:

FEI Number: 65-1053635 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

OMUNDSEN, JANET PRES.
3938 SW 25TH PLACE
CAPE CORAL, FL 33914 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: O ( ) Delete
Name: OMUNDSEN, JANET PRES.
Address: 3938 SW 25TH PLACE
City-St-Zip: CAPE CORAL, FL 33914

Title: O ( ) Delete
Name: HONOHAN, JOHN VP
Address: 2149 CAPE HEATHER CIRCLE
City-St-Zip: CAPE CORAL, FL 33991

Title: O ( ) Delete
Name: LACK, BECKY TREAS
Address: 122 NW 7TH TERRACE
City-St-Zip: CAPE CORAL, FL 33993

Title: O ( ) Delete
Name: FALK, CHRISTINE SEC
Address: 2133 SW 47TH TERR
City-St-Zip: CAPE CORAL, FL 33914

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: O (X) Change ( ) Addition
Name: BLOWERS, GENEVA V.P.
Address: 1202 SW 15TH STREET
City-St-Zip: CAPE CORAL, FL 33991

Title: O ( ) Change (X) Addition
Name: CORR, MARILYN SEC.
Address: 206 SW 38 STREET
City-St-Zip: CAPE CORAL, FL 33914

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: JANET OMUNDSEN PRES 05/28/2008

Electronic Signature of Signing Officer or Director — Date