

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007958

FILED
Feb 15, 2007
Secretary of State

Entity Name: BOOSTERS OF TROOP 160, INC.

Current Principal Place of Business:

14064 S. FOREST OAK CIR
DAVIE, FL 33325 US

New Principal Place of Business:

Current Mailing Address:

14064 S. FOREST OAK CIR
DAVIE, FL 33325 US

New Mailing Address:

FEI Number: 59-3692928

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKRLD, INC.
201 ALHAMBRA CIR, STE 1102
CORAL GABLES, FL 33134 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: D () Delete
Name: KOVACS, MICHAEL
Address: 14064 S. FOREST OAK CIR
City-St-Zip: DAVIE, FL 33325

Title: D () Delete
Name: ALEXANDER, HOWARD
Address: 14064 S. FOREST OAK CIR
City-St-Zip: DAVIE, FL 33325

Title: D () Delete
Name: DISARRO, DANIEL
Address: 14064 S. FOREST OAK CIR
City-St-Zip: DAVIE, FL 33325

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: KOVACS, MICHAEL MR.
Address: 14064 S. FOREST OAK CIR
City-St-Zip: DAVIE, FL 33325

Title: D (X) Change () Addition
Name: REIN, JOSEPH MR.
Address: 5878 SW 120 AVENUE
City-St-Zip: COOPER CITY, FL 33330

Title: D (X) Change () Addition
Name: JABLONSKI, KATHLEEN M MRS.
Address: 6601 SW 178 AVENUE
City-St-Zip: SOUTHWEST RANCHES, FL 33331

I hereby certify that the information supplied with this filing does not qualify for the 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: KATHLEEN M. JABLONSKI

D

02/15/2007

Electronic Signature of Signing Officer or Director

Date