2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2009
Secretary of State

DOCUMENT# N01000001319

Entity Name: DELAND HIGH SCHOOL R.O.T.C. BOOSTERS, INC.

Current Principal Place of Business:

800 N HILL AVE
DELAND, FL 32724

New Principal Place of Business:

Current Mailing Address:

800 N HILL AVE
DELAND, FL 32724

New Mailing Address:

FEI Number: 59-3686764 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PUGH, JAMES R
201 BLUE CRYSTAL DRIVE
DELAND, FL 32720 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/P ( ) Delete
Name: PINNER, LORI
Address: 1080 REYNOLDS ROAD
City-St-Zip: DELEON SPRINGS, FL 32130

Title: D/VP ( ) Delete
Name: PUGH, JAMES R
Address: 201 BLUE CRYSTAL DRIVE
City-St-Zip: DELAND, FL 32720

Title: D/VP ( ) Delete
Name: CORNWELL, GARY
Address: 1198 GREENWOOD TRAILS
City-St-Zip: DELAND, FL 32720

Title: D/T ( ) Delete
Name: BLUM, JAMES A
Address: 905 CASCADES PARK TRAIL
City-St-Zip: DELAND, FL 32720

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: D/T (X) Change ( ) Addition
Name: HOGG, PHYLLIS J
Address: 570 MONTCLAIR AVE
City-St-Zip: ORANGE CITY, FL 32763

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: PHYLLIS J. HOGG D/T 02/03/2009

Electronic Signature of Signing Officer or Director — Date