## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000002637

FILED May 11, 2008 Secretary of State

Entity Name: DUNBAR HIGH SCHOOL ATHLETIC BOOSTER CLUB, INC.

**Current Principal Place of Business: New Principal Place of Business:** 3800 E EDISON AVENUE FT. MYERS, FL 33916 **Current Mailing Address: New Mailing Address:** P O BOX 2055 FT. MYERS, FL 33902 FEI Number: 65-1143183 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: Name and Address of New Registered Agent: CHANCEY, MALTORIA 840 ZANA DR FORT MYERS, FL 33905 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete HUDSON, GLENDA DAVIS, LORAINE Name: Name: 3028 CORTEZ BLVD Address: 1603 DELAWARE AV Address: City-St-Zip: FORT MYERS, FL 33901 US City-St-Zip: FORT MYERS, FL 33916 US Title: SD ( ) Delete Title: SD (X) Change ( ) Addition DAVIS, LORAINE Name: PETERSON, ANNIE Name: Address: 1603 DELAWARE AVE Address: 9419 IVY BROOK RUN City-St-Zip: FORT MYERS, FL 33916 US City-St-Zip: FORT MYERS, FL 33913 US Title: () Delete Title: () Change () Addition CHANCEY, MALTORIA Name: Name: 840 ZANA DR Address: Address: City-St-Zip: FORT MYERS, FL 33905 US City-St-Zip: Title: VPD ( ) Delete Title: VPD (X) Change ( ) Addition Name: WHITE, MARQUIS Name: SIMMS, NANCY 3841 EDGEWOOD AV Address: Address: 3130 ST CHARLES ST City-St-Zip: FORT MYERS, FL 33916 City-St-Zip: FORT MYERS, FL 33916 Title: FSD () Delete Title: () Change () Addition JACKSON, WILLIE Name: Name: 2604 ST. CHARLES STREET Address: Address: City-St-Zip: FORT MYERS, FL 33916 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: MALTORIA CHANCEY TD 05/11/2008