

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002637

FILED
Feb 13, 2009
Secretary of State

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

Current Principal Place of Business:

3800 E EDISON AVENUE
FT. MYERS, FL 33916

New Principal Place of Business:

Current Mailing Address:

P O BOX 2055
FT. MYERS, FL 33902

New Mailing Address:

FEI Number: 65-1143183

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHANCEY, MALTORIA
840 ZANA DR
FORT MYERS, FL 33905 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: PD () Delete
Name: DAVIS, LORAINÉ
Address: 1603 DELAWARE AV
City-St-Zip: FORT MYERS, FL 33916 US

Title: SD () Delete
Name: PETERSON, ANNIE
Address: 9419 IVY BROOK RUN
City-St-Zip: FORT MYERS, FL 33913 US

Title: TD () Delete
Name: CHANCEY, MALTORIA
Address: 840 ZANA DR
City-St-Zip: FORT MYERS, FL 33905 US

Title: VPD () Delete
Name: SIMMS, NANCY
Address: 3130 ST CHARLES ST
City-St-Zip: FORT MYERS, FL 33916

Title: FSD () Delete
Name: JACKSON, WILLIE
Address: 2604 ST. CHARLES STREET
City-St-Zip: FORT MYERS, FL 33916

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
City-St-Zip:

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

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: MALTORIA CHANCEY

TD

02/13/2009

Electronic Signature of Signing Officer or Director

Date