

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005467

FILED
Jul 13, 2006
Secretary of State

Entity Name: FLYERS BOOSTER CLUB, INC.

Current Principal Place of Business:

4581 ASHTON RD
SARASOTA, FL 34233

New Principal Place of Business:

Current Mailing Address:

4581 ASHTON RD
SARASOTA, FL 34233

New Mailing Address:

FEI Number: 65-1137114 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:

FLYER BOOSTER CLUB
C/O KIM MORGAN
4581 ASHTON RD
SARASOTA, FL 34233 US

Name and Address of New Registered Agent:

FLYER BOOSTER CLUB
C/O DENISE ROBERTSON
4581 ASHTON RD
SARASOTA, FL 34233 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: DENISE ROBERTSON

07/13/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ALEXANDER, JODI
Address: 625 PORTIA ST. N
City-St-Zip: NOKOMIS, FL 34275

Title: VPD () Delete
Name: PICCIRELLI, BARBARA
Address: 18502 BRIGGS CIRCLE
City-St-Zip: PORT CHARLOTTE, FL

Title: SD () Delete
Name: MORGAN, KIM
Address: 6320 VERNA BEHANY RD
City-St-Zip: MYAKKA CITY, FL 34251

Title: T () Delete
Name: GABRIEL, SALLY
Address: 417 BAYSIDE LN
City-St-Zip: NOKOMIS, FL 34275

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PAUL, LAUREN
Address: 4640 THOMAS HOBY PLACE
City-St-Zip: SARASOTA, FL 34241

Title: VPD (X) Change () Addition
Name: KING, DIANE
Address: 4242 MADEIRA CT
City-St-Zip: SARASOTA, FL 34233

Title: SD (X) Change () Addition
Name: RAY, TRACY
Address: 7119 67TH TERRACE EAST
City-St-Zip: BRADENTON, FL 34203

Title: T (X) Change () Addition
Name: ROBERTSON, DENISE
Address: 4757 CHARING CROSS RD
City-St-Zip: SARASOTA, FL 34241

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: DENISE ROBERTSON

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07/13/2006

Electronic Signature of Signing Officer or Director

Date