

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005467

FILED
Apr 23, 2009
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 ()

Name and Address of Current Registered Agent:

FLYER BOOSTER CLUB
C/O LISA KNIGHT
4581 ASHTON RD
SARASOTA, FL 34233 US

Name and Address of New Registered Agent:

FLYER BOOSTER CLUB
C/O DANIELLE JACKSON
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: _____

Electronic Signature of Registered Agent

04/23/2009

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ROBINSON, KIM
Address: 4010 WESTFIELD CT
City-St-Zip: SARASOTA, FL 34233

Title: SD () Delete
Name: KNIGHT, LISA
Address: 5751 SADDLE OAK TRAIL
City-St-Zip: SARASOTA, FL 34241

Title: T () Delete
Name: DORIAN, DANYS
Address: 3761 WAKE AVE
City-St-Zip: SARASOTA, FL 34240

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BURTWELL, STEPHANIE
Address: 6500 TALON BAY DRIVE
City-St-Zip: NORTH PORT, FL 34287

Title: SD (X) Change () Addition
Name: JACKSON, DANIELLE
Address: 3039 LINWOOD DR
City-St-Zip: SARASOTA, FL 34232

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: DORIAN DANYS

Electronic Signature of Signing Officer or Director

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04/23/2009

Date