

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N01000005927

1. Entity Name

SANTA FE HIGH SCHOOL GOLF BOOSTERS, INC.

FILED

Mar 25, 2002 8:00 am
Secretary of State

03-25-2002 90141 010 ****61.25

Principal Place of Business Mailing Address
16331 NW M.L. KING BLVD 16331 NW M.L. KING BLVD
ALACHUA FL 32615 ALACHUA FL 32615

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LIBENGOOD, DEBORAH
5828 NW 45TH DR
GAINESVILLE FL 32653

Name

Street (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Deborah Libengood Deborah Libengood

3/14/02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D
NAME ANDERSON, FRANK ☐ Delete
STREET ADDRESS 16331 NW M.L. KING BLVD
CITY-ST-ZIP ALACHUA FL 32615

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD
NAME LIBENGOOD, DEBORAH ☒ Delete
STREET ADDRESS 5828 NW 45TH DR
CITY-ST-ZIP GAINESVILLE FL 32653

TITLE RDnc
NAME Randy McCracken ☒ Change ☐ Addition
STREET ADDRESS 202 Turkey Creek
CITY-ST-ZIP Alachua 32615

TITLE D
NAME LIBENGOOD, MICHAEL ☒ Delete
STREET ADDRESS 5828 NW 45TH DR
CITY-ST-ZIP GAINESVILLE FL 32653

TITLE D
NAME Mark Altenhof ☒ Change ☐ Addition
STREET ADDRESS 16721 NW 94 Ave
CITY-ST-ZIP Alachua, FL 32615

TITLE D
NAME HARTLEY, ROBERT ☒ Delete
STREET ADDRESS 3566 NW 9TH BLVD
CITY-ST-ZIP GAINESVILLE FL 32606

TITLE D
NAME Jackie Redding ☒ Change ☐ Addition
STREET ADDRESS 25002 N.W. 110 Ave
CITY-ST-ZIP High Springs, FL 32653

TITLE D
NAME HARTLEY, CHERYL ☒ Delete
STREET ADDRESS 3566 NW 97TH BLVD
CITY-ST-ZIP GAINESVILLE FL 32606

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Deborah Libengood

3/14/02

352-378-7458

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)