

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 25, 2005 08:00 AM
Secretary of State

DOCUMENT # N01368		
1. Entity Name SEMINOLE BOOSTERS OF LEE COUNTY, INC.		

Principal Place of Business P O BOX 150130 CAPE CORAL FL 33915	Mailing Address P O BOX 150130 CAPE CORAL FL 33915
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE	CR2E037 (10/04)
4. FEI Number 65-0032753	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent SHEARMAN, ROBERT 1715 MONROE STREET FT. MYERS FL 33901
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7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
State 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
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 Due By May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P WENDLAND, CHRIS 5810 NEWFOUNDLAND CIRCLE FORT MYERS FL 33907 ☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SHEARMAN, ROBERT 1715 MONROE ST FT MYERS FL 33901 ☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V RINGERS, LARRY 1371 CURRIER CR FT MYERS FL 33919 ☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T BROOKS, ROBERT A. PO BOX 150130 N/A CAPE CORAL FL 33915 ☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SELL, BARRY 3350 N. KEY DR., A-504 N. FT. MYERS FL ☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D VOTAW, BOB 1240 WALES DRIVE FORT MYERS FL 33901 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition U00000328968 04/25/05-80100-006 61.25
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition

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: *Robert C. Brooks* **4/18/05** **239-247-203**