2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# N01368

Entity Name: SEMINOLE BOOSTERS OF LEE COUNTY, INC.

Current Principal Place of Business:

P O BOX 150130
CAPE CORAL, FL 33915

New Principal Place of Business:

1715 MONROE ST
FORT MYERS, FL 33901

Current Mailing Address:

P O BOX 150130
CAPE CORAL, FL 33915

New Mailing Address:

P O BOX 280
FORT MYERS, FL 33901 02

FEI Number: 65-0032753 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHEARMAN, ROBERT
1715 MONROE STREET
FT. MYERS, FL 33901 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:	D	( ) Delete
Name:	BENNET, BRIAN	
Address:	2817 SW 33ND TERRACE	
City-St-Zip:	CAPE CORAL, FL 33914	
Title:	P	( ) Delete
Name:	SHEARMAN, ROBERT	
Address:	1715 MONROE ST	
City-St-Zip:	FT MYERS, FL 33901	
Title:	D	( ) Delete
Name:	SCHULTZ, BRUCE	
Address:	1388 WHISKEY CREEK DRIVE	
City-St-Zip:	FORT MYERS, FL 33919	
Title:	T	( ) Delete
Name:	BROOKS, ROBERT A.	
Address:	PO BOX 150130 N/A	
City-St-Zip:	CAPE CORAL, FL 33915	
Title:	D	( ) Delete
Name:	SELL, BARRY	
Address:	3350 N. KEY DR., A-504	
City-St-Zip:	N. FT. MYERS, FL	
Title:	D	( ) Delete
Name:	VOTAW, B	
Address:	1240 WALES DRIVE	
City-St-Zip:	FORT MYERS, FL 33901	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	T	(X) Change ( ) Addition
Name:	SHIRK, MACHELLE	
Address:	3379 DANDOLO CIRCLE	
City-St-Zip:	CAPE CORAL, FL 33909	
Title:	S	(X) Change ( ) Addition
Name:	LAMARCHE, GAIL	
Address:	1715 MONROE ST	
City-St-Zip:	FORT MYERS, FL 33901	
Title:	D	(X) Change ( ) Addition
Name:	VOTAW, BOB	
Address:	1240 WALES DRIVE	
City-St-Zip:	FORT MYERS, FL 33901	

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: MACHELLE SHIRK T 04/29/2009

Electronic Signature of Signing Officer or Director — Date