

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01368

FILED
Mar 15, 2011
Secretary of State

Entity Name: SEMINOLE BOOSTERS OF LEE COUNTY, INC.

Current Principal Place of Business:

1715 MONROE ST
FORT MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

P O BOX 280
FORT MYERS, FL 33901 02

New Mailing Address:

P O BOX 280
FORT MYERS, FL 33902

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: VP
Name: JENNIFER, RIDER HARTLEY
Address: 1408 WINKLER AVE
City-St-Zip: FORT MYERS, FL 33901

Title: P
Name: CHRISTOPHER, WENDLAND
Address: 6623 PLANTATION PRESERVE CIRCLE
City-St-Zip: FT MYERS, FL 33966

Title: D
Name: SCHULTZ, BRUCE
Address: 1388 WHISKEY CREEK DRIVE
City-St-Zip: FORT MYERS, FL 33919

Title: T
Name: SHIRK, MACHELLE
Address: 3379 DANDOLO CIRCLE
City-St-Zip: CAPE CORAL, FL 33909

Title: S
Name: LAMARCHE, GAIL
Address: 1715 MONROE ST
City-St-Zip: FORT MYERS, FL 33901

Title: D
Name: VOTAW, BOB
Address: 1240 WALES DRIVE
City-St-Zip: FORT MYERS, FL 33901

I hereby 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 all other like empowered.

SIGNATURE: MACHELLE SHIRK

TREA

03/15/2011

Electronic Signature of Signing Officer or Director

Date