

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000049

FILED  
Feb 24, 2009  
Secretary of State

Entity Name: OLYMPIA HIGH SCHOOL FOOTBALL BOOSTERS, INC.

## Current Principal Place of Business:

ATTN: JOE ALARIE  
260 EAST PLANT STREET  
WINTER GARDEN, FL 34787

## New Principal Place of Business:

ROGER STOUT  
4321 EDGEWATER DRIVE  
ORLANDO, FL 32804

## Current Mailing Address:

ATTN: JOE ALARIE  
260 EAST PLANT STREET  
WINTER GARDEN, FL 34787

## New Mailing Address:

ATTN: ROGER STOUT  
4321 EDGEWATER DRIVE  
ORLANDO, FL 32804

FEI Number: 04-3590901

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ALARIE DESIGN ASSOCIATES, INC  
260 EAST PLANT STREET  
WINTER GARDEN, FL 34787 US

## Name and Address of New Registered Agent:

STOUT REAL ESTATE LLC/ROGER STOUT  
4321 EDGEWATER DRIVE  
ORLANDO, FL 32804 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: ROGER STOUT

02/24/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: ALARIE, JOSPEH  
Address: 260 EAST PLANT STREET  
City-St-Zip: WINTER GARDEN, FL 34787

Title: VD ( ) Delete  
Name: HEAD, ROBERT  
Address: 4301 S. APOPKA VINELAND ROAD  
City-St-Zip: ORLANDO, FL 32835

Title: VD ( ) Delete  
Name: ALARIE, JOSEPH  
Address: 260 EAST PLANT STREET  
City-St-Zip: WINTER GARDEN, FL 34787

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: STOUT, ROGER L  
Address: 4321 EDGEWATER DRIVE  
City-St-Zip: ORLANDO, FL 32804

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VD (X) Change ( ) Addition  
Name: KAVOLSKY, MIKE  
Address: 9579 WESTOVER CLUB CIRCLE  
City-St-Zip: WINDERMERE, FL 34786

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: ROGER STOUT

PRES

02/24/2009

Electronic Signature of Signing Officer or Director

Date