2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004076

Entity Name: BUCHHOLZ FOOTBALL BOOSTERS, INC.

FILED Jan 12, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2626 NW 58TH BOULEVARD GAINESVILLE, FL 32606

Current Mailing Address: New Mailing Address:

2626 NW 58TH BOULEVARD 11801 RESEARCH DR GAINESVILLE, FL 32606 ALACHUA, FL 32615

FEI Number: 02-0612895 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PETER C.K. ENWALL
2626 NW 58TH BOULEVARD
GAINESVILLE, FL 32606

THOMPSON, WILLIAM W TREASUR
11801 RESEARCH DR
ALACHUA, FL 32615

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: WILLIAM W THOMPSON 01/12/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: () Change () Addition Name: SMITH, CHRIS Name:

 Name:
 SMTH, CHRIS
 Name:

 Address:
 2025 SW 112TH STREET
 Address:

 City-St-Zip:
 GAINESVILLE, FL 32607
 City-St-Zip:

Title: SD () Delete Title: () Change () Addition

 Name:
 SMITH, CONI
 Name:

 Address:
 2025 SW 112TH STREET
 Address:

 City-St-Zip:
 GAINESVILLE, FL 32607
 City-St-Zip:

Title: TD () Delete Title: T (X) Change () Addition

 Name:
 ENWALL, JANET W
 Name:
 THOMPSON, WILLIAM W

 Address:
 2626 NW 58TH BOULEVARD
 Address:
 11801 RESEARCH DR

 City-St-Zip:
 GAINESVILLE, FL 32606
 City-St-Zip:
 ALACHUA, FL 32615

Title: T (X) Delete Title: () Change () Addition

 Name:
 ROBINSON, PAMELA
 Name:

 Address:
 5400 NW 39TH AVENUE T172
 Address:

 City-St-Zip:
 GAINESVILLE, FL 32606
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: WILLIAM W THOMPSON TREA 01/12/2004