2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006314

FILED Mar 21, 2012 Secretary of State

Entity Name: FROSTPROOF BULLDOG BOOSTERS, INC.

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

1000 PALM AVE

FROSTPROOF, FL 33843

Current Mailing Address: New Mailing Address:

PO BOX 551

FROSTPROOF, FL 33843

FEI Number: 59-2573467 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:

SCARBOROUGH, BEN 334 F STREET

FROSTPROOF, FL 33843 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD

 Name:
 SCARBOROUGH, BEN

 Address:
 334 F STREET

 City-St-Zip:
 FROSTPROOF, FL 33843

Title: TD

Name: BYRD, JAMES N

Address: P.O. BOX 551 / 64 BLACKJACK AVE

City-St-Zip: FROSTPROOF, FL 33843

Title: TD

Name: BYRD, CYNTHIA S

Address: P.O. BOX 551 / 64 BLACKJACK AVE

City-St-Zip: FROSTPROOF, FL 33843

Title: SD

Name: SMEAL, MICHAEL
Address: 586 SUNRISE DR.
City-St-Zin: BARSON PARK EL 3:

City-St-Zip: BABSON PARK, FL 33827

Title: VPD

 Name:
 POOLEY, RACHEL

 Address:
 110 FAIRCHILD ST.

 City-St-Zip:
 BABSON PARK, FL 33827

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: CYNTHIA S. BYRD TD 03/21/2012