

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007460

FILED  
Jul 06, 2009  
Secretary of State

Entity Name: EAST LAKE GIRLS' BASKETBALL BOOSTERS, INC.

**Current Principal Place of Business:**

1300 SILVER EAGLE DR.  
TARPON SPRINGS, FL 34688

**New Principal Place of Business:**

**Current Mailing Address:**

1300 SILVER EAGLE DR.  
TARPON SPRINGS, FL 34688

**New Mailing Address:**

FEI Number: 82-0581529      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

MURPHY, JOHN L  
1300 SILVER EAGLE DR  
TARPON SPRINGS, FL 34688      US

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

COLON, MIGUEL  
1300 SILVER EAGLE DR  
TARPON SPRINGS, FL 34688      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: MIGUEL COLON

07/06/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: STRIAR, MICHAEL  
Address: 657 TAMARIND LANE  
City-St-Zip: OLDSMAR, FL 34677

Title: VD      ( ) Delete  
Name: GINETTI, THERESA  
Address: 1547 BAY VIEW ST  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: SD      ( ) Delete  
Name: CLAWSON, AMY  
Address: 2965 NORTHFIELD DR  
City-St-Zip: TARPON SPRINGS, FL 34688

Title: TD      ( ) Delete  
Name: MURPHY, JOHN L  
Address: 4344 TREMBLAY WAY  
City-St-Zip: PALM HARBOR, FL 34685

**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: TD      (X) Change ( ) Addition  
Name: COLON, MIGUEL  
Address: 4703 DEVONSHIRE BLVD  
City-St-Zip: PALM HARBOR, FL 34685

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: MIGUEL COLON

TD

07/06/2009

Electronic Signature of Signing Officer or Director

Date