2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Apr 20, 2005 08:00 AM Secretary of State DOCUMENT #_N03000001963 1. Entity Name EAST LAKE HIGH SCHOOL ROBOTICS BOOSTERS, INC. Principal Place of Business Mailing Address 3713 EMBASSY CIRCLE PALM HARBOR FL 34685 3713 EMBASSY CIRCLE PALM HARBOR FL 34685 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc 1st MOORE CR2E037 (10/04) City & State City & State Applied For 4. FEI Number 65-1183226 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WAHNISH, LINDA Street Address (P.O. Box Number is Not Acceptable) 3713 EMBASSY CIRCLE PALM HARBOR FL 34685 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be Trust Fund Contribution. Due By May 1, 2005 Added to Fees Florida Department of State 10 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. ☐ Addition TITLE Defete HILE Change WAHNISH, J. PAUL NAME NAME 3713 EMBASSY CIRCLE STREET ADDRESS STREET ADDRESS PALM HARBOR FL 34685 CITY - ST - 7IP CITY-ST-ZIP VΡ ☐ Addition MILE TITIF Change ☐ Delete U00000318135 CARVER, JOHN C NAME NAME 04/20/05-80046-018 61.25 5695 STAG THICKET LANE STREET ADDRESS STREET ADDRESS PALM HARBOR FL 34685 CITY-ST-ZIP CITY-ST-ZIP ST nueDelete Change Addition WAHNISH, LINDA J 3713 EMBASSY CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-7/P PALM HARBOR FL 34685 CHY-ST-ZIF TITLE Delete TIME ☐ Change ☐ Addition SIMS, GARY NAME NAME 2333 WARWICK DR STREET ADDRESS STREET ADDRESS OLDSMAR FL 34677 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ☐ Change TITLE ☐ Addition CARVES, JOHN NAME NAME 5695 STAG THICKET LANE STREET ADDRESS STREET ADDRESS PALM HARBOR FL 34685 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete Addition ALLAN, DEBBIE NAME NAME 4757 BRAYTON TERRACE SOUTH STREET ADDRESS STREET ADDRESS PALM HARBOR FL 34685 CITY - ST - ZIP City-SI-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/05 727-784-350/

FILED