

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002206

FILED
Jan 14, 2009
Secretary of State

Entity Name: PANTHERS LACROSSE BOOSTER CLUB, INC.

Current Principal Place of Business:

13601 N. MILITARY TRAIL
PALM BEACH GARDENS, FL 33418

New Principal Place of Business:

Current Mailing Address:

6169 EAGLES NEST DRIVE
JUPITER, FL 33458

New Mailing Address:

6291 LINTON STREET
JUPITER, FL 33458

FEI Number: 51-0449683

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE, KIMBERLY
6169 EAGLES NEST DRIVE
JUPITER, FL 33458 US

Name and Address of New Registered Agent:

LISA, SULLIVAN
6291 LINTON STREET
JUPITER, FL 33458 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: LISA SULLIVAN

01/14/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MOORE, KIMBERLY
Address: 6169 EAGLES NEST DRIVE
City-St-Zip: JUPITER, FL 33458

Title: D () Delete
Name: GUERIN, JOAN
Address: 15782 75TH WAY NORTH
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: D () Delete
Name: JACKIE, FINCH
Address: 102 WOODSMUIR CT.
City-St-Zip: PALM BEACH GARDENS, FL 33418

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D/TR (X) Change () Addition
Name: SULLIVAN, LISA
Address: 6291 LINTON STREET
City-St-Zip: JUPITER, FL 33458

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

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: LISA SULLIVAN

TR

01/14/2009

Electronic Signature of Signing Officer or Director

Date