2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000003277

FILED Nov 29, 2009 Secretary of State

Entity Name: CYPRESS BAY MATH BOOSTER CLUB, INC.

Littly Nan	III. CTFRESS BAT MATT BOOSTER CLOB, INC.		
Current Principal Place of Business:		New Principal Place of Business:	
1454 BLUE WESTON,	JAY CIRCLE FL 33327		
Current Mailing Address:		New Mailing Address:	
1454 BLUE WESTON,	EJAY CIRCLE FL 33327		
	05-0568510 FEI Number Applied For () FEI New with s. 607.193(2)(b), F.S., the corporation did not receive Address of Current Registered Agent:		ress of New Registered Agent:
1454 BLUE WESTON,	named entity submits this statement for the purpose	e of changing its reເ	gistered office or registered agent, or both,
SIGNATUR	RE: ISABEL C. RODRIGUEZ Electronic Signature of Registered Agent		 Date
OFFICERS	S AND DIRECTORS:	ADDITIONS/CH	HANGES TO OFFICERS AND DIRECTORS
Title: Name: Address: City-St-Zip:	PD () Delete RODRIGUEZ, ISABEL 1454 BLUE JAY CIRCLE WESTON, FL 33327	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	VD () Delete BABB, STACEY 1586 SANDPIPER CIRCLE WESTON, FL 33327	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	TD () Delete LINDA, KING 333 MALLARD RD. WESTON, FL 33327	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	S () Delete HERRON, LISA 18600 VISTA PARK WESTON, FL 33332	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () Delete VIDAL, GLORIA 18600 VISTA PARK BLVD. WESTON, FL 33332	Title: Name: Address: City-St-Zip:	() Change () Addition

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: ISABEL C. RODRIGUEZ PRES 11/29/2009