

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005888

FILED
Jan 05, 2008
Secretary of State

Entity Name: CYPRESS BAY GIRLS BASKETBALL BOOSTER CLUB, INC.

Current Principal Place of Business:

809 BRIAR RIDGE ROAD
WESTON, FL 33327 US

New Principal Place of Business:

Current Mailing Address:

809 BRIAR RIDGE ROAD
WESTON, FL 33327 US

New Mailing Address:

FEI Number: 30-0180940

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAACH, KAREN Z
809 BRIAR RIDGE ROAD
WESTON, FL 33327 US

Name and Address of New Registered Agent:

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: P () Delete
Name: GACHARNA, AMANDA
Address: 524 PENTA CIRCLE
City-St-Zip: WESTON, FL 33327

Title: T () Delete
Name: BAACH, KAREN
Address: 809 BRIAR RIDGE ROAD
City-St-Zip: WESTON, FL 33327 US

Title: V () Delete
Name: DOLNICK, AMY
Address: 548 CAMBRIDGE DRIVE
City-St-Zip: WESTON, FL 33326

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:

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: KAREN BAACH

T

01/05/2008

Electronic Signature of Signing Officer or Director

Date