2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N03000008254

5/3/2004-91231-040-\$61.25-\$61.25

FILED

1. Entity Name EUSTIS HIGH SCHOOL ATHLETIC BOOSTERS CLUB, INC.							23 PM I: IS	
Principal Place of Business Mailing Address 1300 WASHINGTON AVE P.O. BOX 165 EUSTIS, FL 32726 EUSTIS, FL 32726-0165			5			FALLAHA	NRY OF STATE SSEE, FLORID:	i
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		<u> </u>	01162004	Chg-NP	CR2E037 (10/03)	
City & State		City & State		1	I. FEI Number		<u> </u>	plied For x Applicable
Zip Country		Zip	Country	5. Certificate of Status Desire		Status Desired	d S8.75 Additional Fee Required	
	6. Name and Address of Current	Registered Agent		- 7	. Name and A	adress of New R	egistered Agent	
Name , / /						7		
COX, PAM 26019 CR			Street	\ddress (P.0		is Ng: Acceptable		
EUSTIS, FL 32736			~~	506	MONT	recedlo	170C	
			City	Fustis FL 2000 32726				
 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. It am familiar with, and accept the obligations of registered agent. 								
'SIGNATURE Kelly Bake 8/21/2004								
Signature/typed or protechatine of registered agent and tate if applicable. (NOTE: Registered Agent argnature required when relateding) DAFE								
Filing Fee Is \$61.25 Due by May 1, 2004 P. Election Campaign Financing \$5.0 Added Added						Flor	take check payable t ride Department of S	tate
.10.	OFFICERS AND D		11.	ADI	DITIONS/CHAP	NGES TO OFFICE	RS AND DIRECTORS IN	
TILE .	P	Delete	TITLE	P	- 1		Change Change	Addition
NAME TO	REPASS, LOUISE		NAME	E///o	- Coh	ر در در در در م	11 51	j
STREET ADDRESS	14313 GOLDENVIEW DR		STREET ADDRESS	350	ひろ ボ	aill Hi	11 RS	i
C/TY-ST-ZIP	GRAND ISLAND, FL 32735		CITY-ST-ZP	Fus	515 F	1 327.	36	
TITLE	VP	☐ Delete	TITLE	VP	, .	•	⊠ Change	Addition
NAME	DOUGLAS, MARK		NAME	DALE	meens	- 1	, %	
STREET ADORESS	1406 CHESTERFIELD CT		STREET ADDRESS	3675	51 E.E	dorodo	LAKE In.	
CITY-ST-ZIP	EUSTIS, FL 32726		CITY-ST-ZP	Kusi	TIS. FI	/ <u>?_73</u> 4	<u> </u>	
TITLE	S	☐ Delete	TITLE	5	_		∑ Change	Addition
NAME	-VAUGHN, KRISTY -		NAME	Nanc	y Din	can	20	i
STREET ADDRESS	21060 PARKCREST DR		STREET ADDRESS	263	1 Cours	ray Clark	RD	
Cffy-ST-ZIP								
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NAME	EUSTIS, FL 32736	Oelete	TITLE	Eu	STIS, FI	<u> </u>	Change	Addition
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12. I hereby certify that the information supplied with this filling 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 or an attachment with an address, with all other like empowered. SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNAM OFFICER OR DIRECTION

4/29/04