2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008298

FILED Apr 10, 2006 Secretary of State

Entity Name: CAPE CORAL HIGH SCHOOL SEAHAWKS BASEBALL BOOSTERS, INC.

Current Principal Place of Business: New Principal Place of Business:

3713 NE 16TH AVE 2300 SANTA BARBARA BLVD. CAPE CORAL, FL 33909 CAPE CORAL, FL 33991

Current Mailing Address: New Mailing Address:

3713 NE 16TH AVE 2300 SANTA BARBARA BLVD. CAPE CORAL, FL 33909 CAPE CORAL, FL 33991

FEI Number: 56-2406632 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

INSALACO, CHARLES R
3713 NE 16TH AVE
CAPE CORAL, FL 33909 US
CHIRSTIANSEN, MICHAEL
924 LUCAS RD.
FT. MYERS, FL 333919 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: MICHAEL CHRISTIANSEN 04/10/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD () Delete Title: PRES (X) Change () Addition

Name: SKARBEK, BILL Name: SKARBEK, WILLIAM J

Address: 5304 CORTEZ Address: 5360CORTEZ

City-St-Zip: CAPE CORAL, FL 33904 City-St-Zip: CAPE CORAL, FL 33904

Title: VD () Delete Title: TRES (X) Change () Addition Name: BROWN, DEBORAH Name: CHIRSTIANSEN, MICHAEL

 Address:
 5021 SORRENTO CT.
 Address:
 924 LUCAS RD.

 City-St-Zip:
 CAPE CORAL, FL 33904
 City-St-Zip:
 FT. MYERS, FL 33919

Title: TD () Delete Title: VP (X) Change () Addition

 Name:
 HALVORSEN, JINA
 Name:
 WALLER, KATHY

 Address:
 17941 EAGLE VIEW LANE
 Address:
 3922 SW 12TH PLACE

 City-St-Zip:
 CAPE CORAL, FL 33909
 City-St-Zip:
 CAPE CORAL, FL 33914

Title: SD (X) Delete Title: () Change () Addition

 Name:
 WALKER, CATHY
 Name:

 Address:
 3922 SW 12TH PLACE
 Address:

 City-St-Zip:
 CAPE CORAL, FL 33914
 City-St-Zip:

Title: P (X) Delete Title: () Change () Addition

 Name:
 INSALACO, CHÚCK
 Name:

 Address:
 3713 NE 16 AVE
 Address:

 City-St-Zip:
 CAPE CORAL, FL 33909
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: WILLIAM J. SKARBEK PRES 04/10/2006

Electronic Signature of Signing Officer or Director

Date