## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000008298

FILED Apr 09, 2007 Secretary of State

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

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

2300 SANTA BARBARA BLVD. CAPE CORAL, FL 33991

Current Mailing Address: New Mailing Address:

2300 SANTA BARBARA BLVD. 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:

CHIRSTIANSEN, MICHAEL BRUNI, JAMES

924 LUCAS RD. 2300SANTA BARBARA BLVD. FT. MYERS, FL 333919 US CAPE CORAL, FL 33991 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: JAMES BRUNI 04/09/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 SKARBEK, WILLIAM J
 Name:
 EGAN, ARNOLD J

 Address:
 5360CORTEZ
 Address:
 1704 SE 8TH PLACE

 City-St-Zip:
 CAPE CORAL, FL 33904
 City-St-Zip:
 CAPE CORAL, FL 33900 US

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

 Name:
 CHIRSTIANSEN, MICHAEL
 Name:
 LAWRENCE, ROBERT

 Address:
 924 LUCAS RD.
 Address:
 3017SW 2ND PLACE

 City-St-Zip:
 FT. MYERS, FL 33919
 City-St-Zip:
 CAPE CORAL, FL 33914 US

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition Name: WALLER, KATHY Name: COVIELLO, JOSEPH

 Address:
 3922 SW 12TH PLACE
 Address:
 2300 SANTA BARBARA BLVD.

 City-St-Zip:
 CAPE CORAL, FL 33914
 City-St-Zip:
 CAPE CORAL, FL 33991 US

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

 Name:
 Name:
 ROSSI, DANA

 Address:
 4ddress:
 129 SE 14TH CT.

City-St-Zip: City-St-Zip: CAPE CORAL, FL 33990 US

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: ARNOLD EGAN PRES 04/09/2007