

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008298

FILED
Sep 24, 2008
Secretary of State

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

Current Principal Place of Business:

2300 SANTA BARBARA BLVD.
CAPE CORAL, FL 33991

New Principal Place of Business:

Current Mailing Address:

2300 SANTA BARBARA BLVD.
CAPE CORAL, FL 33991

New Mailing Address:

FEI Number: 56-2406632 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BRUNI, JAMES
2300SANTA BARBARA BLVD.
CAPE CORAL, FL 33991 US

Name and Address of New Registered Agent:

KELLY, CHRIS
2300SANTA BARBARA BLVD.
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: CHRIS KELLY

09/24/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: EGAN, ARNOLD J
Address: 1704 SE 8TH PLACE
City-St-Zip: CAPE CORAL, FL 33900 US

Title: TRES () Delete
Name: LAWRENCE, ROBERT
Address: 3017SW 2ND PLACE
City-St-Zip: CAPE CORAL, FL 33914 US

Title: VP () Delete
Name: COVIELLO, JOSEPH
Address: 2300 SANTA BARBARA BLVD.
City-St-Zip: CAPE CORAL, FL 33991 US

Title: SEC () Delete
Name: ROSSI, DANA
Address: 129 SE 14TH CT.
City-St-Zip: CAPE CORAL, FL 33990 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: MORALES, OBED
Address: 2300 SANTA BARBARA BLVD.
City-St-Zip: CAPE CORAL, FL 33991 US

Title: SEC (X) Change () Addition
Name: METZ, LAURIE
Address: 2300 SANTA BARBARA BLVD.
City-St-Zip: CAPE CORAL, FL 33991 US

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: ARNOLD EGAN

PRES

09/24/2008

Electronic Signature of Signing Officer or Director

Date