2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009102

Aug 31, 2007 Secretary of State

Entity Name: LADY GATORS OF EVERGLADES HIGH, BASKETBALL BOOSTER CLUB, INC.

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

17100 SW 48TH COURT MIRAMAR, FL 33027

Current Mailing Address: New Mailing Address:

19830 NW 4TH STREET

PEMBROKE PINES, FL 33029 US

FEI Number: 56-2406154 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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: Name and Address of New Registered Agent:

SIMMONS, DEBRA A 19830 NW 4TH STREET PEMBROKE PINES, FL, FL 33029 US 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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete SIMMONS, DEBRA A Name: Address: 19830 NW 4TH STREET

City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: () Delete Name: VUCKNAM, SUSAN Address: 861 SW 176TH AVE

City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: () Delete WALLACE, STEPHONIE Name: Address: 14480 SW 37TH ST

City-St-Zip: MIRAMAR, FL 33027

Title: () Delete

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

GREEN, KAREN Name:

Address: 19410 NW 6TH STREET

City-St-Zip: PEMBROKE PINES, FL 33029 US

(X) Change () Addition Title:

Name: ATKINS, SANDRA Address: 214 SW 166TH AVE

City-St-Zip: PEMBROKE PINES, FL 33027 US

Title: (X) Change () Addition

Name: KATKER, MARTHA 20151 NW 8TH STREET Address:

City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: () Change (X) Addition

SIMMONS, DEBRA A Name: 19830 NW 4TH STREET Address:

PEMBROKE PINES, FL 33029 US 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: DEBRA A. SIMMONS Т 08/31/2007