

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003138

FILED
May 18, 2007
Secretary of State

Entity Name: AQUACADES BOOSTER CLUB, INC.

Current Principal Place of Business:

12441 ROYAL PALM BLVD.
CORAL SPRINGS, FL 330653279

New Principal Place of Business:

Current Mailing Address:

12441 ROYAL PALM BLVD.
CORAL SPRINGS, FL 330653279

New Mailing Address:

FEI Number: 20-0962591 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:

Name and Address of New Registered Agent:

ROSSOW, STACIE L
12441 ROYAL PALM BLVD.
CORAL SPRINGS, FL 330653279 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ROSSOW, STACIE L
Address: 12441 ROYAL PALM BLVD.
City-St-Zip: CORAL SPRINGS, FL 330653279

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ROSSOW, STACIE L
Address: 22544 SEA BASS DR
City-St-Zip: BOCA RATON, FL 33428

Title: O () Change (X) Addition
Name: NUNEZ, MARIA
Address: 4978 SW 91ST TERRACE
City-St-Zip: COOPER CITY, FL 33328

Title: O () Change (X) Addition
Name: LUZARDO, MONICA
Address: 10935 NW 66 CT
City-St-Zip: PARKLAND, FL 33076

Title: O () Change (X) Addition
Name: O'CONNELL, KELLY
Address: 8560 SHADOW COURT
City-St-Zip: CORAL SPRINGS, FL 33071

Title: O () Change (X) Addition
Name: MEDINA, MIROSLAVA
Address: 4125 NW 79TH AVE
City-St-Zip: CORAL SPRINGS, FL 33065

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: STACIE LEE ROSSOW

D

05/18/2007

Electronic Signature of Signing Officer or Director

Date