

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010093

FILED  
Apr 27, 2007  
Secretary of State

Entity Name: PHS STEP TEAM BOOSTER CLUB, INC.

**Current Principal Place of Business:**

103 NW 72ND AVENUE  
PLANTATION, FL 33317 US

**New Principal Place of Business:**

**Current Mailing Address:**

103 NW 72ND AVENUE  
PLANTATION, FL 33317 US

**New Mailing Address:**

FEI Number: 20-1804202

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BLUNT, LUCINDA E  
103 NW 72ND AVENUE  
PLANTATION, FL 33317 US

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

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: PD ( ) Delete  
Name: BLUNT, LUCINDA E  
Address: 103 NW 72ND AVENUE  
City-St-Zip: PLANTATION, FL 33317 US

Title: VPD ( ) Delete  
Name: PINKNEY, FRANK J  
Address: 11065 NW 39TH STREET, APT. 203  
City-St-Zip: SUNRISE, FL 33351 US

Title: VPD ( ) Delete  
Name: BAKER, SHIRLEY D  
Address: 6901 NW 16TH STREET  
City-St-Zip: PLANTATION, FL 33312 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VPD (X) Change ( ) Addition  
Name: PINKNEY, FRANK J  
Address: 8120 CLEARY BLVD, APT. 1213  
City-St-Zip: PLANTATION, FL 33324 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: LUCINDA E. BLUNT

PD

04/27/2007

Electronic Signature of Signing Officer or Director

Date