

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000491

FILED
Apr 23, 2007
Secretary of State

Entity Name: THE 9.0 BOOSTER CLUB, INC

Current Principal Place of Business:

4603-B SHIREY AVENUE
JACKSONVILLE, FL 32210 US

New Principal Place of Business:

4603-B SHIRLEY AVENUE
JACKSONVILLE, FL 32210 US

Current Mailing Address:

4603-B SHIREY AVENUE
JACKSONVILLE, FL 32210 US

New Mailing Address:

4603-B SHIRLEY AVENUE
JACKSONVILLE, FL 32210 US

FEI Number: 20-2189397

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INGRAM, TAMMY
8258 HAMDEN CIRCLE WEST
JACKSONVILLE, FL 32244 US

Name and Address of New Registered Agent:

DUGGAN, LAURY C
9782 SANDLER ROAD
JACKSONVILLE, FL 32222 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: LAURY C. DUGGAN

04/23/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DUGGAN, LAURY
Address: 4603-B SHIREY AVENUE
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: VP () Delete
Name: POWERS, BETTY
Address: 4603-B SHIREY AVENUE
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: SEC () Delete
Name: JOHNSON, SHERRY
Address: 4603-B SHIREY AVENUE
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: TRES (X) Delete
Name: INGRAM, TAMMY
Address: 4603-B SHIREY AVENUE
City-St-Zip: JACKSONVILLE, FL 32210 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DUGGAN, LAURY C
Address: 4603-B SHIREY AVENUE
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: VP (X) Change () Addition
Name: SPELLER, AUDREY
Address: 4603-B SHIREY AVENUE
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: SEC (X) Change () Addition
Name: LEPORATI, CYNTHIA
Address: 4603-B SHIREY AVENUE
City-St-Zip: JACKSONVILLE, FL 32210 US

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

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: CYNTHIA LEPORATI

SEC

04/23/2007

Electronic Signature of Signing Officer or Director

Date