

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005231

FILED
Apr 07, 2006
Secretary of State

Entity Name: LADY GATOR TENNIS BOOSTERS, INC.

Current Principal Place of Business:

POST OFFICE BOX 14485
GAINESVILLE, FL 32604

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 14485
GAINESVILLE, FL 32604

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAPPENECKER, STEPHEN A
2772-S NORTHWEST 43RD STREET
GAINESVILLE, FL 32606 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: D () Delete
Name: RAPPENECKER, STEPHEN A
Address: 1606 N.W. 66TH TERRACE
City-St-Zip: GAINESVILLE, FL 32605

Title: D () Delete
Name: FRANCIS, BARBARA
Address: 10027 S.W. 52ND ROAD
City-St-Zip: GAINESVILLE, FL 32608

Title: D () Delete
Name: LOTZKAR, PHYLLIS
Address: 1321 N.W. 47TH TERRACE
City-St-Zip: GAINESVILLE, FL 32605

Title: D () Delete
Name: HODGE, B J
Address: 13243 S.W. 1ST PLACE
City-St-Zip: TIOGA, FL 32669

Title: D () Delete
Name: MILLIMAN, PRISCILLA
Address: 4718 N.W. 17TH PLACE
City-St-Zip: GAINESVILLE, FL 32608

Title: D () Delete
Name: LITZKAR, STAN
Address: 1321 N.W. 47TH TERRACE
City-St-Zip: GAINESVILLE, FL 32605

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: STEPHEN RAPPENECKER

D

04/07/2006

Electronic Signature of Signing Officer or Director

Date