2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2008
Secretary of State

DOCUMENT# N05000005231

Entity Name: LADY GATOR TENNIS BOOSTERS, INC.

Current Principal Place of Business:

2772-S NORTHWEST 43RD STREET
GAINESVILLE, FL 32604

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 14485
GAINESVILLE, FL 32604

New Mailing Address:

FEI Number: 20-3374612 **FEI Number Applied For ( )** **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 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: PHYLLIS LOTZKAR D 01/14/2008

Electronic Signature of Signing Officer or Director — Date