2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006275

Name:

Address:

City-St-Zip:

FILED Aug 27, 2009 Secretary of State

D O O O IV		00270			ocorciary or otate
Entity Nan	ne: JAGUARS AQU	ATIC BOOSTER CLUB CORP.			
Current Principal Place of Business:			New Principal Place of Business:		
	RTSPLEX DR PRINGS, FL 33065	US			
Current Mailing Address:			New Mailing Address:		
	RTSPLEX DR PRINGS, FL 33065	US			
In accordanc	e with s. 607.193(2)(b),	lumber Applied For() FEI Nu F.S., the corporation did not receive t Registered Agent:	•	e.	Certificate of Status Desired () of New Registered Agent:
ROGAN, LINDA C			MINICHIELLO, LINDA M		
1125 NW 119TH AVE CORAL SPRINGS, FL 33071 US			1234 NW 110TH TERRACE CORAL SPRINGS, FL 33071 US		
	named entity submite of Florida.	s this statement for the purpose	of changing i	its register	ed office or registered agent, or both,
SIGNATUR	ELLO	08/27/2009			
	Electronic Sigr	nature of Registered Agent			Date
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	T () Delete CASEY, GINA 2700 SPORTSPLEX DE CORAL SPRINGS, FL		Title: Name: Address: City-St-Zip:	2700 SPO	(X) Change()Addition LUCIANNA RTSPLEX DR PRINGS, FL 33065 US
Title: Name: Address: City-St-Zip:	T () Delete ROGAN, LINDA C 1125 NW 119TH AVE CORAL SPRINGS, FL	33071 US	Title: Name: Address: City-St-Zip:	1234 NW	(X) Change ()Addition LO, LINDA M 110TH TERRACE PRINGS, FL 33071 US
Title:	()Delete		Title:	Т	() Change (X) Addition

Name:

Address:

City-St-Zip:

CASEY, GINA

2700 SPORTSPLEX DR

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: LINDA MINICHIELLO T 08/27/2009