

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N05000008458

1. Entity Name
**GODBY HIGH SCHOOL SWIMMING AND DIVING
BOOSTERS, INC.**



SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 SEP -6 PM 2:18

Principal Place of Business
**4522 WHISPER HOLLOW LANE
TALLAHASSEE, FL 32303**

Mailing Address
**4522 WHISPER HOLLOW LANE
TALLAHASSEE, FL 32303**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

08252006

Chg-NP

CR2E037 (4/06)

4. FEI Number

20-3327835

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WYMAN, STEPHEN D
4522 WHISPER HOLLOW LANE
TALLAHASSEE, FL 32303**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
WYMAN, STEPHEN D
4522 WHISPER HOLLOW LANE
TALLAHASSEE, FL 32303** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
BUCHANAN, BUCK
4342 ROCKINGHAM
TALLAHASSEE, FL 32303** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
Laura Cable
4252 Ben Blvd.
Tallahassee, FL 32303** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
WYMAN, TRACY A
4522 WHISPER HOLLOW LANE
TALLAHASSEE, FL 32303** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T/S
800079733598
09/12/06--01068--015 **\$61.25** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
BUCHANAN, BECKY
4342 ROCKINGHAM
TALLAHASSEE, FL 32303** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STEPHEN D. WYMAN

Date

8-25-06

Daytime Phone #

850-766-2329