

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009476

FILED
Apr 16, 2009
Secretary of State

Entity Name: THE BULLDOGS QUARTERBACK BOOSTER CLUB, INC.

Current Principal Place of Business:

5343 SW 91 AVE
MIAMI, FL 33165

New Principal Place of Business:

Current Mailing Address:

5343 SW 91 AVE
MIAMI, FL 33165

New Mailing Address:

FEI Number: 20-3461476

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FERNANDEZ, ADALBERTO
5343 SW 91 AVE
MIAMI, FL 33165 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: P () Delete
Name: FERNANDEZ, ADALBERTO
Address: 5343 SW 91 AVE
City-St-Zip: MIAMI, FL 33165

Title: V () Delete
Name: CHAO, JOSE
Address: 5343 SW 91 AVE
City-St-Zip: MIAMI, FL 33165

Title: T () Delete
Name: FERNANDEZ, NOEMI
Address: 5343 SW 91 AVE
City-St-Zip: MIAMI, FL 33165

Title: S () Delete
Name: MUNOZ, ISBEL
Address: 5343 SW 91 AVE
City-St-Zip: MIAMI, FL 33165

Title: F (X) Delete
Name: FERNANDEZ LENGOMIN, BARBARA
Address: 5343 SW 91 AVE
City-St-Zip: MIAMI, FL 33165

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: MUNOZ, ISBEL
Address: 5343 SW 91 AVE
City-St-Zip: MIAMI, FL 33165

Title: TF (X) Change () Addition
Name: FERNANDEZ, NOEMI
Address: 5343 SW 91 AVE
City-St-Zip: MIAMI, FL 33165

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: NOEMI FERNANDEZ

TF

04/16/2009

Electronic Signature of Signing Officer or Director

Date