

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010417

FILED
Feb 10, 2006
Secretary of State

Entity Name: LADY PATRIOT BOOSTER CLUB INC

Current Principal Place of Business:

21050 NW 14 PL
202
MIAMI, FL 33169

New Principal Place of Business:

Current Mailing Address:

21050 NW 14 PL
202
MIAMI, FL 33169

New Mailing Address:

FEI Number: 06-1757581

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, MARCELLA
21050 NW 14 PL
202
MIAMI, FL 33169 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: ROBINSON, MARCELLA
Address: 21050 NW 14 PL 202
City-St-Zip: MIAMI, FL 33169

Title: VP () Delete
Name: TOOKES, DELPHINE
Address: 6626 NW 181 LN
City-St-Zip: MIAMI, FL 33015

Title: T () Delete
Name: ARNOLD, CHANEL
Address: 18330 NW 68 AVE
City-St-Zip: MIAMI, FL 33015

Title: S () Delete
Name: SALMON, SHARLENE
Address: 6269 NW 186 ST #105
City-St-Zip: MIAMI, FL 33015

Title: O () Delete
Name: CAMI, NERY
Address: 6626 NW 181 LN
City-St-Zip: MIAMI, FL 33015

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:

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: MARCELLA ROBINSON

P

02/10/2006

Electronic Signature of Signing Officer or Director

Date