

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006459

FILED
Apr 26, 2009
Secretary of State

Entity Name: RAMPELLO DOWNTOWN PARTNERSHIP SCHOOL ATHLETIC BOOSTER CLUB, INC.

Current Principal Place of Business:

802 EAST WASHINGTON STREET
TAMPA, FL 33602

New Principal Place of Business:

Current Mailing Address:

802 EAST WASHINGTON STREET
TAMPA, FL 33602

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOWELL, WILLIAM
802 EAST WASHINGTON ST
TAMPA, FL 33602 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: JACKSON, ANGELA
Address: 802 E WASHINGTON ST
City-St-Zip: TAMPA, FL 33602

Title: V () Delete
Name: BERRY, JUDY
Address: 802 E WASHINGTON ST
City-St-Zip: TAMPA, FL 33602

Title: S () Delete
Name: BAGGETT, CHERYL
Address: 802 E WASHINGTON ST
City-St-Zip: TAMPA, FL 33602

Title: T () Delete
Name: BRISTOL, LISA
Address: 802 E WASHINGTON ST
City-St-Zip: TAMPA, FL 33602

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BAGGETT, CHERYL
Address: 802 E WASHINGTON ST
City-St-Zip: TAMPA, FL 33602

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

Title: S (X) Change () Addition
Name: DIAZ, SUSAN
Address: 802 E WASHINGTON ST
City-St-Zip: TAMPA, FL 33602

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: LISA BRISTOL

T

04/26/2009

Electronic Signature of Signing Officer or Director

Date