2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007442

Entity Name: CUDA LACROSSE BOOSTER CLUB, INC.

FILED Apr 26, 2009 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
--	-----------------------------

10441 SW 115 STREET MIAMI, FL 33176

Current Mailing Address: New Mailing Address:

10441 SW 115 STREET MIAMI, FL 33176

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

 WINGARD, GEORGE
 WINGARD, GEORGE A MR.

 10441 SW 115 STREET
 10441 SW 115 STREET

 MIAMI, FL 33176
 US

 MIAMI, FL 33176
 US

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: MARGARET (PEGGY) WINGARD 04/26/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: WINGARD, GEORGE Name: WINGARD, GEORGE A

Address: 10441 SW 115 STREET Address: 10441 SW 115 STREET

City-St-Zip: MIAMI, FL 33176

City-St-Zip: MIAMI, FL 33176

Title: VP () Delete Title: VP (X) Change () Addition Name: WINGARD, PEGGY Name: WINGARD, MARGARET

Address: 10441 SW 115 STREET Address: 10441 SW 115 STREET
City-St-Zip: MIAMI, FL 33176 City-St-Zip: MIAMI, FL 33176

Title: ST () Delete Title: () Change () Addition

 Name:
 TEIJELO, SERGIO
 Name:

 Address:
 9404 SW 125 TERRACE
 Address:

 City-St-Zip:
 MIAMI, FL 33176
 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: MARGARET S. WINGARD VP 04/26/2009