

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009192

FILED
Aug 21, 2007
Secretary of State

Entity Name: LINCOLN HIGH VOLLEYBALL BOOSTER CLUB, INC.

Current Principal Place of Business:

2001 OLD ST AUGUSTINE RD #A104
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

2001 OLD ST AUGUSTINE RD #A104
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: 87-0780043 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HINTON, ANDY
2001 OLD ST AUGUSTINE RD #A104
TALLAHASSEE, FL 32301 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: PFEIFER, SUSAN
Address: 1831 WINELAND LANE
City-St-Zip: TALLAHASSEE, FL 32317

Title: VP () Delete
Name: PRIDGEON, KARLA
Address: 3618 FOUR OAKS BLVD
City-St-Zip: TALLAHASSEE, FL 32308

Title: S () Delete
Name: BRIGGS, CAROLYN
Address: 1833 HALSTEAD BLVD
City-St-Zip: TALLAHASSEE, FL 32308

Title: T () Delete
Name: RICH, DEEANN
Address: 2035 ANGUS STREET
City-St-Zip: TALLAHASSEE, FL 32317

Title: D () Delete
Name: HINTON, ANDY
Address: 2001 OLD ST AUGUSTINE RD #A104
City-St-Zip: TALLAHASSEE, FL 32301

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 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: ANDY HINTON

MGR

08/21/2007

Electronic Signature of Signing Officer or Director

Date