

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009554

FILED  
Mar 19, 2009  
Secretary of State

Entity Name: SUWANNEE HIGH SCHOOL GOLF BOOSTERS, INC.

## Current Principal Place of Business:

16857 COUNTY RD 49  
WELLBORN, FL 32094

## New Principal Place of Business:

1314 SW PINE AVE  
SHS GOLF BOOSTER  
LIVE OAK, FL 32060

## Current Mailing Address:

16857 COUNTY RD. 49  
WELLBORN, FL 32094

## New Mailing Address:

10364 26TH PLACE  
LIVE OAK, FL 32060

FEI Number: 11-3790522

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LANCE, SUSAN M  
16857 COUNTY RD 49  
WELLBORN, FL 32094 US

## Name and Address of New Registered Agent:

MATTOX, MICHELLE  
10364 26TH PLACE  
LIVE OAK, FL 32060 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: MICHELLE MATTOX

03/19/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: HILLHOUSE, EDWARD D  
Address: 7868 31ST RD  
City-St-Zip: WELLBORN, FL 32094

Title: D ( ) Delete  
Name: FULLBRIGHT, JOYCE  
Address: 7182 52ND STREET  
City-St-Zip: LIVE OAK, FL 32060

Title: D ( ) Delete  
Name: LANCE, SUSAN  
Address: 16857 COUNTY RD 49  
City-St-Zip: WELLBORN, FL 32094

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O (X) Change ( ) Addition  
Name: HANEY, WES  
Address: 8948 104TH STREET  
City-St-Zip: LIVE OAK, FL 32060

Title: O (X) Change ( ) Addition  
Name: MATTOX, MICHELLE  
Address: 10364 26TH PLACE  
City-St-Zip: LIVE OAK, FL 32060

Title: O (X) Change ( ) Addition  
Name: SPRAGUE, JOE  
Address: 14718 COUNTY RD. 132  
City-St-Zip: LIVE OAK, FL 32060

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: MICHELLE MATTOX

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03/19/2009

Electronic Signature of Signing Officer or Director

Date