2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

04-24-2008 90109 037 ****61.00
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DOCUMENT # N06000009876

1. Entity Name
PINES CHARTER LADY JAGS BOOSTER CLUB, INC.

FILED
08 MAY 15 PM 1:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
332 SW 184TH WAY PEMBROKE PINES, FL 33029	332 SW 184TH WAY PEMBROKE PINES, FL 33029

04212008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
	18331 PINES BLVD.
Suite, Apt. #, etc.	Suite, Apt. #, etc. # 121
City & State	City & State PEMBROKE PINES, FL
Zip / Country	Zip 33029 / Country USA

4. FEI Number 20-5603715 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
DANIELS, DONNA 332 SW 184TH WAY PEMBROKE PINES, FL 33029	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD DANIELS, DONNA 332 SW 184TH WAY PEMBROKE PINES, FL 33029	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD HARDISON, PAULA 332 SW 184TH WAY PEMBROKE PINES, FL 33029	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V, D PAULA HARDISON 18331 PINES BLVD. #121 PEMBROKE PINES, FL 33029 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD SUMBY, LISA 332 SW 184TH WAY PEMBROKE PINES, FL 33029	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T, D LISA SUMBY 18331 PINES BLVD. #121 PEMBROKE PINES, FL 33029 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BONDARENKO, KIM 332 SW 184TH WAY PEMBROKE PINES, FL 33029	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S, D KIM BONDARENKO 18331 PINES BLVD. #121 PEMBROKE PINES, FL 33029 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SIGLER, BETTY 332 SW 184TH WAY PEMBROKE PINES, FL 33029	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BEATRIZ SIGLER 18331 PINES BLVD. #121 PEMBROKE PINES, FL 33029 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CHIERICO, LYNDA 332 SW 184TH WAY PEMBROKE PINES, FL 33029	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LYNDA CHIERICO 18331 PINES BLVD. #121 PEMBROKE PINES, FL 33029 ☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Donna L. Daniels 4-21-08 954-704-8485
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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