2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011308

Entity Name: WILDCAT FOOTBALL BOOSTER CLUB, INC.

FILED Jul 27, 2007 Secretary of State

14696 JESSE YARBOROUGH RD. 13108 RIDGE LANE

GLEN ST. MARY, FL 32040 GLEN ST. MARY, FL 32040

Current Mailing Address: New Mailing Address:

14696 JESSE YARBROUGH RD. PO BOX 922

GLEN ST. MARY, FL 32040 MACCLENNY, FL 32063

FEI Number: 20-5795473 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: Name and Address of New Registered Agent:

LYONS, EMIL C SR. 106 W BLVD N.

MACCLENNY, FL 32063 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:

Flackwaria Cinnakura of Danishara d Anauk

Electronic Signature of Registered Agent

Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

tle: P () Delete Title: P (X) Change () Addition

 Name:
 YARBROUGH, WILLIAM B
 Name:
 SWEAT, TIMOTHY P

 Address:
 14696 JESSE YARBROUGH RD.
 Address:
 13108 RIDGE LANE

 City-St-Zip:
 GLEN ST. MARY, FL 32040
 City-St-Zip:
 GLEN ST. MARY, FL 32040

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 SWEAT, TIMOTHY P
 Name:
 MUNSON, FRED

 Address:
 13108 RIDGE LANE
 Address:
 13860 N CR 121

 City-St-Zip:
 GLEN ST. MARY, FL 32040
 City-St-Zip:
 MACCLENNY, FL 32063

Title: TREA () Delete Title: **TREA** (X) Change () Addition LYONS, EMIL C SR. Name: YARBROUGH, WILLIAM B Name: 14696 JESSE YARBROUGH RD. Address: 106 W BLVD. N. Address: City-St-Zip: MACCLENNY, FL 32063 City-St-Zip: GLEN ST. MARY, FL 32040

Title: () Delete Title: SEC () Change (X) Addition

 Name:
 Name:
 HARRELL, PAM

 Address:
 Address:
 783 FOX RUN CIRCLE

 City-St-Zip:
 City-St-Zip:
 MACCLENNY, FL 32063

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: TIMOTHY P. SWEAT PRES 07/27/2007