2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004018

FILED Apr 20, 2009 Secretary of State

Entity Name: HAINES CITY ATHLETIC BOSSTER CLUB INC. **Current Principal Place of Business: New Principal Place of Business:** 2370 PAULETTE DRIVE HAINES CITY, FL 33844 **Current Mailing Address: New Mailing Address:** 2370 PAULETTE DRIVE HAINES CITY, FL 33844 FEI Number: 83-0464437 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BROADERS, RITA 798 LAKE CRYSTAL ROAD LAKE HAMILTON, FL 33851 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BROADERS, RITA F Name: Name: Address: 2800 HORNET DRIVE Address: City-St-Zip: HAINES CITY, FL 33844 City-St-Zip: Title: () Delete Title: () Change () Addition Name: BEALE, BETH Name: Address: 2800 HORNET DRIVE Address: City-St-Zip: HAINES CITY, FL 33844 City-St-Zip: Title: () Delete Title: () Change () Addition SOLES, JOANN Name: Name: 2800 HORNET DR Address: Address: City-St-Zip: HAINES CITY, FL 33844 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: JOANN L. SOLES TREA 04/20/2009