## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000006447

FILED May 03, 2010 Secretary of State

Entity Name: PARADISE BOOSTER CLUB, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

915 SE 14H PLACE 915 SE 14TH PLACE **UNITS 10-14** UNITS 10-14

CAPE CORAL, FL 33990 CAPE CORAL, FL 33990

**Current Mailing Address: New Mailing Address:** 

915 SE 14H PLACE 915 SE 14TH PLACE

UNITS 10-14 **UNITS 10-14** CAPE CORAL, FL 33990 CAPE CORAL, FL 33990

FEI Number: 26-0393797 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:

DEFILIPPI, PATRICIA 915 SE 14TH PLACE **UNITS 10-14** CAPE CORAL, FL 33990 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:**

KIRKPATRICK, PATRICIA Name: Address: 241 SW 36 TERRACE City-St-Zip: CAPE CORAL, FL 33914

Title:

Name: HASKEW, PERLA Address: 1729 SW 28TH LANE City-St-Zip: CAPE CORAL, FL 33990

Title:

RAMIREZ, MARY JANE Name: Address: 4447 BIRMINGHAM ST City-St-Zip: FORT MYERS, FL 33914

Title:

Name: DEFILLIPPI, PATRICIA 2081 CAPE HEATHER CIR. Address: City-St-Zip: CAPE CORAL, FL 33991

I hereby 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 all other like empowered.

SIGNATURE: PATRICIA DEFILIPPI T 05/03/2010