

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 10, 2012
Secretary of State

DOCUMENT# N07000008022

Entity Name: MCHS GIRLS VOLLEYBALL BOOSTER CLUB, INC**Current Principal Place of Business:**1860 SW CRANE CREEK CIRCLE
PALM CITY, FL 34990**New Principal Place of Business:****Current Mailing Address:**1860 SW CRANE CREEK AVE
PALM CITY, FL 34990**New Mailing Address:****FEI Number:** 26-0698716**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**WALCH, HARRY
2015 SW DANFORTH CIR
PALM CITY, FL 34990 US**Name and Address of New Registered Agent:**LYDON, KARI
1860 CRANE CREEK AVE
PALM CITY, FL 34990 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: KARI LYDON

08/10/2012

Electronic Signature of Registered Agent_____
Date**OFFICERS AND DIRECTORS:**

Title: P
Name: ASHLEY, BRETT
Address: 5248 SW LANDING CREEK LANE
City-St-Zip: PALM CITY, FL 34990

Title: VP
Name: LYDON, KARI
Address: 1860 SW CRANE CREEK AVE
City-St-Zip: PALM CITY, FL 34990

Title: S
Name: TURNER, PAM
Address: 1940 SW CRANE CREEK AVE
City-St-Zip: PALM CITY, FL 34990

Title: T
Name: MARTIN, KIM
Address: SW
City-St-Zip: PALM CITY, FL 34990

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: KARI LYDON

VP

08/10/2012

Electronic Signature of Signing Officer or Director_____
Date