2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009230

FILED Feb 13, 2012 Secretary of State

Entity Name: GULF BREEZE HIGH SCHOOL VOLLEYBALL BOOSTER CLUB, INC.

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

362 GULF BREEZE PKWY

PMB #162

GULF BREEZE, FL 32561 US

Current Mailing Address: New Mailing Address:

362 GULF BREEZE PKWY

PMB #162

GULF BREEZE, FL 32561 US

FEI Number: 26-1167882 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:

JOHNSON, DAN PRES. 1235 HOLIDAY DR

GULF BREEZE, FL 32563 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:

Title: MR

Name: HURD, ERIN PRES Address: 313 DOLPHIN ST

City-St-Zip: GULF BREEZE, FL 32561 US

Title: MRS

Name: CHAPMAN, BARBARA TREASUR Address: 1016 CORONADO CT City-St-Zip: GULF BREEZE, FL 32563 US

Title: MS

Name: MARYBETH, RINEY VICE PR Address: 335 ANDREW JACKSON TRAIL City-St-Zip: GULF BREEZE, FL 32561 US

Title: MRS

 Name:
 KUHN, JUDY SECRETA

 Address:
 675 GULF BREEZE PKWY

 City-St-Zip:
 GULF BREEZE, FL 32563 US

Title: D Name: D, D Address: D

City-St-Zip: GULF BREEZE, FL 32563 US

Title: D Name: D, D Address: D

City-St-Zip: GULF BREEZE, FL 32563 US

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: BARBARA CHAPMAN TREA 02/13/2012