

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007315

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: PHS TIGERS SWIM & DIVE BOOSTERS, INC.

## Current Principal Place of Business:

501 COMMENDENCIA STREET  
PENSACOLA, FL 32502

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 12950  
PENSACOLA, FL 325912950

## New Mailing Address:

FEI Number: 26-3138083

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

STONE, JEFFREY A  
501 COMMENDENCIA STREET  
PENSACOLA, FL 32502 US

## Name and Address of New Registered Agent:

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: P ( ) Delete  
Name: SEELY, SHELLIE  
Address: 3315 WELLINGTON RD  
City-St-Zip: PENSACOLA, FL 32504

Title: VP ( ) Delete  
Name: MOLCHAN, JOHN  
Address: 4230 ROMMITCH LN  
City-St-Zip: PENSACOLA, FL 32504

Title: S ( ) Delete  
Name: DANLEY, KRISTEN  
Address: 524 DERRY DR  
City-St-Zip: CANTONMENT, FL 32533

Title: T ( ) Delete  
Name: MILLER, CONNIE  
Address: 3445 BROOKSHIRE DR.  
City-St-Zip: PENSACOLA, FL 32504

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: CHMIEL, THERESA  
Address: 6381 KEATING ROAD  
City-St-Zip: PENSACOLA, FL 32504

Title: VP (X) Change ( ) Addition  
Name: SEELY, SHELLIE  
Address: 3315 WELLINGTON ROAD  
City-St-Zip: PENSACOLA, FL 32504

Title: S (X) Change ( ) Addition  
Name: DUBOSE, THERESA  
Address: 986 NEW HAVEN DRIVE  
City-St-Zip: CANTONMENT, FL 32533

Title: T (X) Change ( ) Addition  
Name: MILLER, JAMES A JR.  
Address: 3445 BROOKSHIRE DR.  
City-St-Zip: PENSACOLA, FL 32504

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: THERESA CHMIEL

P

04/28/2009

Electronic Signature of Signing Officer or Director

Date