

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000008106

FILED  
Jan 06, 2010  
Secretary of State

**Entity Name:** TIGER TEAM HIGHLAND OAKS MIDDLE BOOSTER CLUB, INC.

**Current Principal Place of Business:**

2999 NE 191ST STREET  
SUITE 409  
AVENTURE, FL 33180

**New Principal Place of Business:**

**Current Mailing Address:**

2999 NE 191ST STREET  
SUITE 409  
AVENTURE, FL 33180

**New Mailing Address:**

**FEI Number:** 26-3265614

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SONN & MITTELMAN, P.A.  
2999 NE 191 STREET  
SUITE 409  
AVENTURA, FL 33180 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  
Name: SONN, TERRI G  
Address: C/O SONN & MITTELMAN 2999 NE 191 ST. #409  
City-St-Zip: AVENTURA, FL 33180

Title: VP  
Name: FELDER, STACEY  
Address: 2125 NE 201 STREET  
City-St-Zip: MIAMI, FL 33179

Title: SVP  
Name: CURTIS, SHARON  
Address: 2485 NE 202ND STREET  
City-St-Zip: MIAMI, FL 33180

Title: T  
Name: HIRSCH, TAL I  
Address: 20801 NE 202ND STREET  
City-St-Zip: AVENTURA, FL 33180

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: TERRI SONN

P

01/06/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date