

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000010367

**FILED**  
**Oct 18, 2009**  
**Secretary of State**

**Entity Name:** MILTON HIGH SCHOOL LADY PANTHERS SOCCER BOOSTER CLUB, INC.

**Current Principal Place of Business:**

5445 STEWART STREET  
MILTON, FL 32570

**New Principal Place of Business:**

**Current Mailing Address:**

5445 STEWART STREET  
MILTON, FL 32570

**New Mailing Address:**

**FEI Number:** 27-0663642      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
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:**

GILLESPIE, LESLIE A  
4546 AMBLEWOOD COURT  
PACE, FL 32571 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: LESLIE A. GILLESPIE

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: GILLESPIE, LESLIE A  
Address: 4546 AMBLEWOOD COURT  
City-St-Zip: PACE, FL 32571

Title: V ( ) Delete  
Name: FRANCISCO, DANIEL  
Address: 3010 N. 19TH AVENUE  
City-St-Zip: MILTON, FL 32583

Title: T ( ) Delete  
Name: MAYEAUX, JANET  
Address: 5624 RUSSELL DRIVE  
City-St-Zip: MILTON, FL 32570

Title: S ( ) Delete  
Name: LOY, TERESA  
Address: 3912 SUN VALLEY COURT  
City-St-Zip: MILTON, FL 32583

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: LESLIE A. GILLESPIE

P

10/18/2009

Electronic Signature of Signing Officer or Director

Date