

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000008055

FILED
Mar 30, 2010
Secretary of State

Entity Name: AFJROTC FL-20083 WINGS BOOSTER CLUB, INC.

Current Principal Place of Business:

SICKLES HIGH SCHOOL
7950 GUNN HIGHWAY
TAMPA, FL 33626

New Principal Place of Business:

Current Mailing Address:

SICKLES HIGH SCHOOL
7950 GUNN HIGHWAY
TAMPA, FL 33626

New Mailing Address:

FEI Number: 80-0463436

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WERNER, DEBORAH L
8613 VIVIAN BASS WAY
ODESSA, FL 33556 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: D
Name: DONOVAN, MICHAEL
Address: 8762 HAMPDEN DRIVE
City-St-Zip: TAMPA, FL 33626

Title: TD
Name: MITCHELL, LEONARD
Address: 16219 HOYLAKES DR
City-St-Zip: ODESSA, FL 33556

Title: VD
Name: WIRT, CATHY
Address: 13901 BASIN ST
City-St-Zip: TAMPA, FL 336253295

Title: D
Name: ROBALDO, THERESA
Address: 4607 SNOW SHOWER CT
City-St-Zip: LUTZ, FL 33558

Title: PD
Name: SCHUBERT, KATHLEN
Address: 7543 ARMAND CIRCLE
City-St-Zip: TAMPA, FL 33634

Title: SD
Name: COONTS, TRISH
Address: 9219 N MOBLEY RD
City-St-Zip: ODESSA, FL 33556

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: K SCHUBERT

PD

03/30/2010

Electronic Signature of Signing Officer or Director

Date