

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000004143

FILED  
Jul 25, 2011  
Secretary of State

**Entity Name:** GULF BREEZE HIGH SCHOOL TRACK AND CROSS COUNTRY BOOSTERS, INC.

**Current Principal Place of Business:**

127 WINDSOR PLACE  
GULF BREEZE, FL 32561

**New Principal Place of Business:**

**Current Mailing Address:**

127 WINDSOR PLACE  
GULF BREEZE, FL 32561

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

DROOGSMA, MIKE  
127 WINDSOR PLACE  
GULF BREEZE, FL 32561 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: DROOGSMA, MIKE  
Address: 127 WINDSOR PLACE  
City-St-Zip: GULF BREEZE, FL 32561

Title: D  
Name: O'HARA, WAYNE  
Address: 927 CORONADO DR.  
City-St-Zip: GULF BREEZE, FL 32563

Title: D  
Name: WEIN, BILL  
Address: 1253 TALL PINE CIR.  
City-St-Zip: GULF BREEZE, FL 32561

Title: D  
Name: SULLIVAN, ANDREA  
Address: 631 BONILACE CIR.  
City-St-Zip: GULF BREEZE, FL 32561

Title: D  
Name: ALDRIDGE, TOM  
Address: 6506 TIDEWATER DR.  
City-St-Zip: NAVARRE, FL 32566

Title: D  
Name: PARRISH, BOBBY  
Address: 405 LORUNA DR.  
City-St-Zip: GULF BREEZE, FL 32561

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: MIKE DROOGSMA

D

07/25/2011

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

\_\_\_\_\_  
Date