

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000006656

**FILED**  
**Jan 05, 2011**  
**Secretary of State**

**Entity Name:** PHS CHEERLEADING BOOSTER CLUB, INC.

**Current Principal Place of Business:**

6901 NW 16TH ST  
PLANTATION, FL 33313

**New Principal Place of Business:**

**Current Mailing Address:**

6901 NW 16TH ST  
PLANTATION, FL 33313

**New Mailing Address:**

5920 ALMOND TERRACE  
PLANTATION, FL 33317

**FEI Number:** 32-0312603

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHOATE, GAIL  
5920 ALMOND TERRACE  
PLANTATION, FL 33317 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:** CHOATE, GAIL  
**Address:** 5920 ALMOND TERRACE  
**City-St-Zip:** PLANTATION, FL 33317

**Title:** VP  
**Name:** ETHRIDGE, RHONDA  
**Address:** 3500 NW 34TH AVE  
**City-St-Zip:** SUNRISE, FL 33309

**Title:** ST  
**Name:** MOSLEY, MELLISA  
**Address:** 10311 NW 12TH PLACE  
**City-St-Zip:** PLANTATION, FL 33322

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:** GAIL CHOATE

PRES

01/05/2011

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

\_\_\_\_\_  
Date