

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

DOCUMENT# N10000007295

**FILED**  
**Mar 29, 2011**  
**Secretary of State**

**Entity Name:** GULF BREEZE HIGH SCHOOL BASKETBALL TIP OFF BOOSTER CLUB, INC.

**Current Principal Place of Business:**

2839 LYNX TRAIL  
GULF BREEZE, FL 32563

**New Principal Place of Business:**

**Current Mailing Address:**

2839 LYNX TRAIL  
GULF BREEZE, FL 32563

**New Mailing Address:**

**FEI Number:** 27-3041507

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TAYLOR, MARK  
2839 LYNX TRAIL  
GULF BREEZE, FL 32563 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: TAYLOR, MARK  
Address: 2839 LYNX TRAIL  
City-St-Zip: GULF BREEZE, FL 32563

Title: D  
Name: CALLAHAN, BARRY  
Address: 21 CALLE HERMOSA  
City-St-Zip: PENSACOLA BEACH, FL 32561

Title: D  
Name: MEREDETH, DARCY  
Address: 3616 TIGER POINT BLVD  
City-St-Zip: GULF BREEZE, FL 32563

Title: D  
Name: MOLINA, AMY  
Address: 453 YORK ST  
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: MARK TAYLOR

PRES

03/29/2011

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

\_\_\_\_\_  
Date