2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 29, 2002 8:00 am
Secretary of State

04-18-2002 90431 007 ****70.00

DOCUMENT # N11911

1. Entity Name

BOCA CIEGA HIGH SCHOOL ACTIVITIES BOOSTER CLUB, INC.

Principal Place of Business	Mailing Address
924 58TH STREET SOUTH ST. PETERSBURG FL 33707	924 58TH STREET SOUTH ST. PETERSBURG FL 33707

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2652119 — Applied For / Not Applicable

5. Certificate of Status Desired [X] $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PAONESSA, BARBARA M 924 58TH STREEET SOUTH ST. PETERSBURG FL 33707	Name PATRICIA A. HAVER Street Address (P.O. Box Number is Not Acceptable) 924 58th St. S. Gulfport, FL 33707 City GULFPORT FL Zip Code 33707

8. 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 Patricia A. Haver — Patricia Haver — 4-4-02

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. [ ] **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	PD [X] Delete	TITLE	PD [X] Change [ ] Addition
NAME	PAONESSA, BARBARA	NAME	JEAN GORDON
STREET ADDRESS	924 58TH ST. S.	STREET ADDRESS	924 58th St. S.
CITY-ST-ZIP	GULFPORT FL 33707	CITY-ST-ZIP	Gulfport, FL 33707
TITLE	VPD [X] Delete	TITLE	VPD [X] Change [ ] Addition
NAME	SHUMAN, RANDY	NAME	MARY DRAYTON
STREET ADDRESS	924 58TH ST.	STREET ADDRESS	924 58th St. S.
CITY-ST-ZIP	GULFPORT FL 33707	CITY-ST-ZIP	GULFPORT, FL 33707
TITLE	STD [X] Delete	TITLE	STD [X] Change [ ] Addition
NAME	MEDICI, ROBERT A JR	NAME	JACK BARBER
STREET ADDRESS	924 58TH ST. S.	STREET ADDRESS	924 58th St. S.
CITY-ST-ZIP	GULFPORT FL 33707	CITY-ST-ZIP	GULFPORT, FL 33707
TITLE	[ ] Delete	TITLE	[ ] Change [ ] Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	[ ] Delete	TITLE	[ ] Change [ ] Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	[ ] Delete	TITLE	[ ] Change [ ] Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

CR2E037 (9/01)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. JEAN P. GORDON 4-8-02 893-2780

SIGNATURE: SIGNATURE REQUIRED Patricia A. Haver 4-4-02 893-2780

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #