

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22533

FILED  
Jan 25, 2008  
Secretary of State

**Entity Name:** BLOOMINGDALE SENIOR HIGH SCHOOL ATHLETIC BOOSTER CLUB, INC.

**Current Principal Place of Business:**

BLOOMINGDALE HIGH SCHOOL  
1700 BLOOMINGDALE AVE. E.  
VALRICO, FL 33596 US

**New Principal Place of Business:**

**Current Mailing Address:**

BLOOMINGDALE HIGH SCHOOL  
1700 BLOOMINGDALE AVE. E.  
VALRICO, FL 33596 US

**New Mailing Address:**

**FEI Number:** 59-2836461

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BEASLEY, STEVE  
1700 E. BLOMINGDALE AVE.  
VALRICO, FL 33594 US

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

BEASLEY, STEVE  
1700 E. BLOMINGDALE AVE.  
VALRICO, FL 33596 US

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:

01/25/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BEASLEY, STEVE  
Address: 1700 BLOOMINGDALE AVE E  
City-St-Zip: VALRICO, FL 33596

Title: VD ( ) Delete  
Name: BROWN, MARY  
Address: 1700 BLOOMINGDALE AVE E  
City-St-Zip: VALRICO, FL 33596

Title: SD ( ) Delete  
Name: GOLD, TRISH  
Address: 1700 BLOOMINGDALE AVE E  
City-St-Zip: VALRICO, FL 33596

Title: TD ( ) Delete  
Name: PEDERSEN-GAC, NANCY  
Address: 1700 BLOOMINGDALE AVE E  
City-St-Zip: VALRICO, FL 33596

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: NANCY PEDERSEN-GAC

TD

01/25/2008

Electronic Signature of Signing Officer or Director

Date