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FILED
Feb 09 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N23604 (4)
1. Corporation Name
WESTERN QUARTERBACK BOOSTER CLUB, INC.



Principal Place of Business Mailing Address
1200 SW 136TH AVE WESTERN HIGH SCHOOL FT. LAUDERDALE FL 33325 US
1200 SW 136TH AVE WESTERN HIGH SCHOOL FT. LAUDERDALE FL 33325 US

3. Date Incorporated or Qualified 11/23/1987
4. FEI Number 65-0033718 Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? Yes No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 28 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent
HEISS, DEBBIE
843 HERITAGE DR.
WESTON FL 33326

10. Name and Address of New Registered Agent
81 Name DOTTIE FAUERBACH
82 Street Address (P.O. Box Number is Not Acceptable) 6861 Falconsgate Ave.
83 DAVIE, FL.
84 City FL 85 Zip Code 33331

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE DOTTIE FAUERBACH Dottie Fauerbach 1/24/98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

| | | |
|----------------|-------------------------|--|
| TITLE | D/S | <input type="checkbox"/> DELETE |
| NAME | BURDICK, JACKIE | |
| STREET ADDRESS | 18101 SW 55 ST | |
| CITY-ST-ZIP | FT LAUDERDALE FL 33331 | |
| TITLE | DP | <input checked="" type="checkbox"/> DELETE |
| NAME | ANDREW, DAVID | |
| STREET ADDRESS | 3046 LAKEWOOD DR | |
| CITY-ST-ZIP | FT. LAUDERDALE FL 33332 | |
| TITLE | DT | <input checked="" type="checkbox"/> DELETE |
| NAME | HEISS, DEBBIE | |
| STREET ADDRESS | 843 HERITAGE DR | |
| CITY-ST-ZIP | FT LAUDERDALE FL 33326 | |
| TITLE | | <input type="checkbox"/> DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | |
|--------------------|---|
| 1.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME | |
| 1.3 STREET ADDRESS | |
| 1.4 CITY-ST-ZIP | |
| 2.1 TITLE | <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 2.2 NAME | DP ROTHAR, BILL |
| 2.3 STREET ADDRESS | 1000 S.W. 134th Av. |
| 2.4 CITY-ST-ZIP | DAVIE, FL. 33325 |
| 3.1 TITLE | <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 3.2 NAME | DT FAUERBACH, DOTTIE |
| 3.3 STREET ADDRESS | 6861 FALCONSGATE AVE. |
| 3.4 CITY-ST-ZIP | DAVIE, FL. 33331 |
| 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.2 NAME | |
| 4.3 STREET ADDRESS | |
| 4.4 CITY-ST-ZIP | |
| 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5.2 NAME | |
| 5.3 STREET ADDRESS | |
| 5.4 CITY-ST-ZIP | |
| 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 6.2 NAME | |
| 6.3 STREET ADDRESS | |
| 6.4 CITY-ST-ZIP | |

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: DOTTIE FAUERBACH Dottie Fauerbach 1/24/98 (954) 4316-1986

CR2E037 (10/97)