2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2007
Secretary of State

DOCUMENT# N25244

Entity Name: MCARTHUR BASEBALL BOOSTER CLUB, INC.

Current Principal Place of Business:

6501 HOLLYWOOD BLVD.
HOLLYWOOD, FL 33024

New Principal Place of Business:

Current Mailing Address:

6501 HOLLYWOOD BLVD.
HOLLYWOOD, FL 33024

New Mailing Address:

FEI Number: 65-0049760 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DAVIS, DEBRA
8321 N.W. 17 CT.
PEMBROKE PINES, FL 33024 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 ( ) Delete
Name: PETERSEN, KRISTIN
Address: 7321 MCARTHUR PARKWAY
City-St-Zip: HOLLYWOOD, FL 33024

Title: D ( ) Delete
Name: MURPHY, DIANNA
Address: 710 S.W. 71 TERR.
City-St-Zip: PEMBROKE PINES, FL 33023

Title: D ( ) Delete
Name: DAVIS, DEBRA
Address: 8321 N.W. 17TH CT.
City-St-Zip: PEMBROKE PINES, FL 33024

Title: D ( ) Delete
Name: BERNARDI, WILLIAM PRES
Address: 331 N 65 TH WAY
City-St-Zip: HOLLYWOOD, FL 33024

Title: D ( ) Delete
Name: CHAISER, VICKI
Address: 1811 NW 84 AVE.
City-St-Zip: PEMBROKE PINES, FL 33024

Title: D ( ) Delete
Name: FLORIO, CURTIS
Address: 711 SW 71 AVE
City-St-Zip: PEMBROKE PINES, FL 33023

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:

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 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: DEBRA DAVIS TREA 03/23/2007

Electronic Signature of Signing Officer or Director — Date