2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27652

FILED Aug 09, 2009 Secretary of State

Entity Name: CHAMBERLAIN HIGH SCHOOL ATHLETIC BOOSTER CLUB, INC.

Current Principal Place of Business: New Principal Place of Business: 9401 N. BOULEVARD TAMPA, FL 336129316 US **Current Mailing Address: New Mailing Address:** 9401 N. BOULEVARD TAMPA, FL 336129316 US FEI Number: 59-2899100 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SCIONTI, RICHARD 9401 NORTH BOULEVARD TAMPA, FL 33612 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition DIAZ, KIM JESSUP, GARY Name: Name: Address: 10708 LAKE CARROLL WAY Address: 9401 NORTH BLVD. City-St-Zip: TAMPA, FL 33618 City-St-Zip: TAMPA, FL 33612 Title: Title: (X) Change () Addition () Delete Name: LORI, JESSUP Name: JESSUP, LORI Address: 9401 NORTH BOULEVARD Address: 9401 NORTH BOULEVARD City-St-Zip: TAMPA, FL 33612 City-St-Zip: TAMPA, FL 33612 Title: () Delete Title: VP1 (X) Change () Addition PULLARO, SUZETTE ALEXANDER, DAVID Name: Name: 1612 MAGDALENE MANOR DRIVE Address: Address: 9401 NORTH BLVD. City-St-Zip: TAMPA, FL 33613 City-St-Zip: TAMPA, FL 33612 Title: () Delete Title: VP2 (X) Change () Addition CALDWELL, BRENT Name: PULLARO, NICK Name: 1612 MAGDALENE MANOR DRIVE 9401 NORTH BLVD. Address: Address: City-St-Zip: TAMPA, FL 33613 City-St-Zip: TAMPA, FL 33612 Title: () Delete Title: () Change (X) Addition STORTS, CRAIG Name: Name: 9401 NORTH BLVD. Address: Address: TAMPA, FL 33612 City-St-Zip: 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: CRAIG STORTS T 08/09/2009