2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

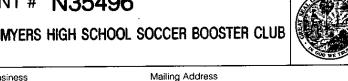
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Mar 26, 2003 8:00 am Secretary of State 03-26-2003 90178 012 ****61.25

FILED

NORTH FORT MYERS HIGH SCHOOL SOCCER BOOSTER CI , INC.	LUE



Principal Place of Business 5818 INVERNESS CIRCLE 5000 ORANGE GROVE BLVD N. FT. MYERS FL 33903 NORTH FT MYERS FL 33903 HS 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES 4. FEI Number 65-0170900 Applied For City & State City & State Not Applicable Country \$8.75 Additional Zip Zip Country 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent-6. Name and Address of Current Registered Agent Name FERGUSON, MARCY Street Address (P.O. Box Number is Not Acceptable) **5818 INVERNESS CIRCLE** N. FT. MYERS FL 33903 Zip Code City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Addition Change TITLE ☐ Delete TITLE NAME FERGUSON, MARCY NAME STREET ADDRESS **5818 INVERNESS CIRCLE** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP N FT MYERS FL 33903 XX Addition ☐ Change D۷ XX Delete TITLE TITLE Douglas McKeever DOPSLOFF, LORI NAME NAME STREET ADDRESS 3973 Hidden Acres Circle STREET ADDRESS 1104 S.E. 1ST TERRACE N._Ft.~Myers.-FL 33903-CITY-ST-ZIP CITY-ST-ZIP CAPE CORAL FL 33990 XX Addition ☐ Change XX Delete TITLE TITLE BISHOP, MARTHA. NAME Christine Bolebruch NAME STREET ADDRESS 38751 STILL LANE 5716 Flamingo Drive STREET ADDRESS CITY-ST-ZIP Cape Coral, FL 33904 N FT MYERS FL 33917 CITY-ST-7IP ☐ Addition ☐ Change ☐ Delete TITLE KEMPF, TAMMY NAME NAME STREET ADDRESS STREET ADDRESS 1117 SW 6TH AVENUE CITY-ST-ZIP CITY-ST-ZIP CAPE CORAL FL 33991 ☐ Addition ☐ Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

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.

3/24/03

(239) 997-4084