

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

FILED
Mar 26, 2003 8:00 am
Secretary of State

03-26-2003 90178 012 ****61.25

DOCUMENT # N35496

1. Entity Name

NORTH FORT MYERS HIGH SCHOOL SOCCER BOOSTER CLUB, INC.



Principal Place of Business

**5000 ORANGE GROVE BLVD
NORTH FT MYERS FL 33903
US**

Mailing Address

**5818 INVERNESS CIRCLE
N. FT. MYERS FL 33903
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0170900**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FERGUSON, MARCY
5818 INVERNESS CIRCLE
N. FT. MYERS FL 33903**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **DP** ☐ Delete
NAME **FERGUSON, MARCY**
STREET ADDRESS **5818 INVERNESS CIRCLE**
CITY-ST-ZIP **N FT MYERS FL 33903**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **DV** ☒ Delete
NAME **DOPSLOFF, LORI**
STREET ADDRESS **1104 S.E. 1ST TERRACE**
CITY-ST-ZIP **CAPE CORAL FL 33990**

TITLE **DV** ☐ Change ☒ Addition
NAME **Douglas McKeever**
STREET ADDRESS **3973 Hidden Acres Circle**
CITY-ST-ZIP **N. Ft. Myers, FL 33903**

TITLE **DS** ☒ Delete
NAME **BISHOP, MARTHA**
STREET ADDRESS **38751 STILL LANE**
CITY-ST-ZIP **N FT MYERS FL 33917**

TITLE **DS** ☐ Change ☒ Addition
NAME **Christine Bolebruch**
STREET ADDRESS **5716 Flamingo Drive**
CITY-ST-ZIP **Cape Coral, FL 33904**

TITLE **DT** ☐ Delete
NAME **KEMPF, TAMMY**
STREET ADDRESS **1117 SW 6TH AVENUE**
CITY-ST-ZIP **CAPE CORAL FL 33991**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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.

SIGNATURE: **Marcy Ferguson**

3/24/03 (239) 997-4084

CR2E037 (10/02)