2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37191

FILED Jan 22, 2005 Secretary of State

Entity Name: PANHANDLE SEMINOLE BOOSTERS, INC.

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 645

MARIANNA, FL 32447 US

Current Mailing Address: New Mailing Address:

P.O. BOX 645

City-St-Zip:

MARIANNA, FL 324470645 US

FEI Number: 59-2344884 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SWEENEY, GEORGE
2494 SPRING CREEK RD
MARIANNA, FL 32446 US
SWEENEY, GEORGE
2494 SPRING CREEK RD
MARIANNA, FL 32448 US

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: 01/22/2005

Electronic Signature of Registered Agent Date

City-St-Zip:

MARIANNA, FL

OFFICERS AND DIRECTORS:

MARIANNA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T () Delete Title: D (X) Change () Addition

 Name:
 FUQUE, VICKIË B
 Name:
 DRYDEN, MATT C

 Address:
 4938 FLYNT DR
 Address:
 3121 DRYDEN DR

 City-St-Zip:
 MARIANNA, FL 32446
 City-St-Zip:
 MARIANNA, FL 32446

Title: D () Delete Title: T (X) Change () Addition

Name:GEORGE SWEENEY,Name:GEORGE SWEENEY,Address:2494 SPRING CREEK RD.Address:2494 SPRING CREEK RD.

Title: D () Delete Title: () Change () Addition

 Name:
 SHERRIE BROWN,
 Name:

 Address:
 2863 WILDWOOD CIR.
 Address:

 City-St-Zip:
 MARIANNA, FL
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 ROY BAKER,
 Name:

 Address:
 2853 WILDWOOD CIR
 Address:

 City-St-Zip:
 MARIANNA, FL 32447
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: GEORGE SWEENEY T 01/22/2005