## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 29, 2004 8:00 am Secretary of State 04-29-2004 90313 047 \*\*\*\*61.25

DOCUMENT # N42076  1. Entity Name SPARTAN'S DIAMOND BOOSTER CLUB, INC.								0	4-29-2004 9	0313 04	7 ****61.	25
Principal Place of Business 5400 STIRLING ROAD HOLLYWOOD, FL 33021				Mailing Address 5400 STIRLING ROAD HOLLYWOOD, FL 33021			14019149					
2. Principal Place of Business				3. Mailing Address								
Suite, Apt.	#, etc.		Su	Suite, Apt. #, etc.				04222004 C	hg-NP	CR2E0	37 (10/03)	
City & State			Cit	City & State				4. FEI Number 15-5349319			)—— <u>1</u> ——	plied For t Applicable
Zip	,	Country		Zip C		ntry	5. Certificate of Status Desi			<u>.</u>	\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent STEIN, JASON HOLLYWOOD HILLS HIGH SCHOOL 5400 STIRLING ROAD HOLLYWOOD, FL 33021						Name JORGE MIRANDA  Street Address (P.O. Box Number is Not Acceptable) HOWYWOOD HILLS HIGH SCHOOL - BASEBALL BYOO STIRLING ROAD  City HOLLY WOOD FL Zig Code 33021						
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 typid or printed name of registered agent and site if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE												
Filing Fee is \$61.25  Due by May 1, 2004  9. Election Campaign Finance Trust Fund Contribution.								\$5.00 May Be Added to Fees			k payable to tment of Si	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND DIRECTORS  TD					ST-ZIP	T/D U5/ 293	ADDITIONS/CHANG TE. MORR ZEW 5: LAUDERDA	15 3 ST	RS AND DI	☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	4211 GAF	RFIELD STREET OOD, FL 33021				T ADDRESS ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D QUEEN; RAY  4424 SW 49TH COURT  FT. LAUDERDALE, FL 33314					T ADDRESS S1-Zip	390	ARD GAR 9-SHERID LYWOOD,	AN'ST"	3021	Change	<b>⊠</b> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	•						☐ Change	☐ Additian
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete							Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			1	☐ Delete	CITY-	ET ADDRESS ST-ZIP	,	-			☐ Change	☐ Addition
12. I hereby certify that the information supplied with the 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 flag 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 truetee employeered to execute his report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or or an attachment with an address, with all pthertike employered.  SIGNATURE:												
J. W. 1771	~··~·	SIGNATURE AND TYPED OF	PHINTED NA	ME OF SIGNING OFFICER	OR DIRECT	OR			Oate		Daytime Phone #	