

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N42501

**FILED**  
**Jan 17, 2012**  
**Secretary of State**

**Entity Name:** SUNRISE SWIMMING BOOSTER CLUB, INC.

**Current Principal Place of Business:**

SUNRISE CIVIC CENTER  
10610 WEST OAKLAND PARK BLVD.  
SUNRISE, FL 33351 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 450205  
SUNRISE, FL 33345 US

**New Mailing Address:**

**FEI Number:** 65-0245482

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WATHEN, CHRISTI  
3226 NW 102 TERRACE  
SUNRISE, FL 33351 US

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

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:**

Title: P  
Name: KEAN, GIGI  
Address: 8584 NW 49TH STREET  
City-St-Zip: LAUDERHILL, FL 33351 US

Title: VP  
Name: TRODICK, GERI  
Address: 2410-1 ARAGON BLVD  
City-St-Zip: SUNRISE, FL 33322 US

Title: S  
Name: SCHLEICHER, AMY  
Address: 10440 NW 18TH DRIVE  
City-St-Zip: PLANTATION, FL 33322 US

Title: T  
Name: AVELLANEDA, HAROLD  
Address: 9451 NW 54TH STREET  
City-St-Zip: SUNRISE, FL 33351 US

I hereby 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 all other like empowered.

SIGNATURE: CHRISTI WATHEN

RA

01/17/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date