

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46007

FILED  
Jan 27, 2008  
Secretary of State

**Entity Name:** COLUMBIA SOCCER BOOSTERS, INC.

**Current Principal Place of Business:**

469 FIGHTING TIGER DR  
LAKE CITY, FL 32024 US

**New Principal Place of Business:**

469 FIGHTING TIGER DR  
LAKE CITY, FL 32055 US

**Current Mailing Address:**

P.O. BOX 2819  
LAKE CITY, FL 32056 US

**New Mailing Address:**

P.O. BOX 3366  
LAKE CITY, FL 32056 US

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired (X)**

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

WATSON, KEN  
1009 SW MAIN BLVD  
SUITE 100  
LAKE CITY, FL 32025 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: PD ( ) Delete  
Name: WATSON, KEN  
Address: 1009 SW MAIN BLVD SUITE 100  
City-St-Zip: LAKE CITY, FL 32024

Title: TD ( ) Delete  
Name: CARPENTER, SANDY  
Address: 287 SW RED MAPLE WAY  
City-St-Zip: LAKE CITY, FL 32024

Title: SD ( ) Delete  
Name: JENKINS, SHIRLEY  
Address: 153 NW CYPRESS COVE DR  
City-St-Zip: LAKE CITY, FL 32055

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: SANDY CARPENTER

TD

01/27/2008

Electronic Signature of Signing Officer or Director

Date