

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000360

FILED  
Jan 08, 2008  
Secretary of State

Entity Name: TATE BASEBALL BOOSTERS, INC.

## Current Principal Place of Business:

1717 TATE ROAD  
GONZALEZ, FL 32560

## New Principal Place of Business:

1771 TATE SCHOOL ROAD  
CANTONMENT, FL 32533

## Current Mailing Address:

P.O. BOX 311  
GONZALES, FL 32560 US

## New Mailing Address:

P.O. BOX 311  
GONZALEZ, FL 32560 US

FEI Number: 59-3154615

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SWILLEY, KIETH  
1290 ANDREA LANE  
CANTONMENT, FL 32533 US

## Name and Address of New Registered Agent:

LOCKMAN, TERRENCE S  
1025 HWY 196  
MOLINO, FL 32577 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: TERRENCE S. LOCKMAN

01/08/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SWILLEY, KIETH  
Address: 1290 ANDREA LANE  
City-St-Zip: CANTONMENT, FL 32533

Title: VPD ( ) Delete  
Name: JACKSON, DIANE  
Address: 11735 OLD COURSE RD  
City-St-Zip: CANTONMENT, FL 32533

Title: SD ( ) Delete  
Name: PRICE, LESA  
Address: 1053 TATE RD  
City-St-Zip: CANTONMENT, FL 32533

Title: TD ( ) Delete  
Name: RENNSPIES, JEANNIE R  
Address: 2202 CRICKET RIDGE DR.  
City-St-Zip: CANTONMENT, FL 32533

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: LOCKMAN, TERRENCE S  
Address: 1025 HWY 196  
City-St-Zip: MOLINO, FL 32577

Title: VPD (X) Change ( ) Addition  
Name: WASS, MARK  
Address: 8721 REBEL ROAD  
City-St-Zip: PENSACOLA, FL 32526

Title: SD (X) Change ( ) Addition  
Name: MULL, MICHELLE  
Address: 2177 LIBERTY LOOP  
City-St-Zip: CANTONMENT, FL 32533

Title: TD (X) Change ( ) Addition  
Name: JACKSON, DIANE L  
Address: 11735 OLD COURSE ROAD  
City-St-Zip: CANTONMENT, FL 32533

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: TERRENCE S. LOCKMAN

PD

01/08/2008

Electronic Signature of Signing Officer or Director

Date