

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005746

FILED
Mar 15, 2008
Secretary of State

Entity Name: BOOSTER CLUB AT SCOTT RAKOW, INC.

Current Principal Place of Business:

2700 SHERIDAN AVE
MIAMI BEACH, FL 33140

New Principal Place of Business:

Current Mailing Address:

2700 SHERIDAN AVE
MIAMI BEACH, FL 33140

New Mailing Address:

FEI Number: 65-0458875

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHAFFNER, BEVERLY
2700 SHERIDAN AVENUE
% BOOSTER CLUB
MIAMI BEACH, FL 33140 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: SHAFFNER, BEVERLY
Address: 4675 NW 8TH. DRIVE
City-St-Zip: PLANTATION, FL 33317

Title: D () Delete
Name: EPELBAUM CANNON, ANNETTE
Address: 103-7TH TERRACE
City-St-Zip: MIAMI BEACH, FL 33139

Title: VP () Delete
Name: PRIZANT, REVECA
Address: 2020 CALAIS ROAD
City-St-Zip: MIAMI BEACH, FL 33141

Title: TD () Delete
Name: OGLE, DEBRA
Address: 9130 NW 25 COURT
City-St-Zip: SUNRISE, FL 33322

Title: SD (X) Delete
Name: FEDEROFFER, NAOMI
Address: 1080 NE 135 STREET
City-St-Zip: NORTH MIAMI, FL 33161

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: ADKINS, BECKY
Address: 1691 MICHIGAN AVE , STE 210
City-St-Zip: MIAMI BEACH, FL 33139

Title: D (X) Change () Addition
Name: PRIZANT, REVECA
Address: 2020 CALAIS ROAD
City-St-Zip: MIAMI BEACH, FL 33141

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: BEVERLY SHAFFNER

PRES

03/15/2008

Electronic Signature of Signing Officer or Director

Date