

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # N94000004202**

1. Entity Name

SOUTHEAST HIGH SCHOOL SPORTS BOOSTER CLUB, INC.

Principal Place of Business

**1200 37TH AVE. EAST
BRADENTON FL 34208**

Mailing Address

**1200 37TH AVE. EAST
BRADENTON FL 34208**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0512250

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MAECHTLE, PAUL A
1200 37TH AVE. EAST
BRADENTON FL 34208**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
FEE IS \$61.25**9. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees****Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP		TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
	DS	MAECHTLE, PAUL A	902 134 ST. E. BRADENTON FL	<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
	DP	BIERMAN, LARRY	5739 -29 ST E. BRADENTON FL 34203	<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
	DV	DRING, BOB	7450 -279 ST. E. MYAKKA CITY FL 34251	<input checked="" type="checkbox"/> Delete		DU	GALBREATH, KEN 4824 GLENBROOK DR. SARASOTA, FL 34243		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	DT	MAHAFFEY, CYNDI	3327 47TH AVE EAST BRADENTON FL 34203	<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this 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 that 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 trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Cyndi Mahaffey, Treasurer 1/10/01 727-8837

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Jan 23, 2001 8:00 am
Secretary of State

01-23-2001 90061 006 ****61.25

702690

DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)