2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Apr 18, 2007 8:00 am Secretary of State 04-18-2007 90187 013 ****61.25

FILED

DOCUMENT # N95000000325 SARASOTA CHEER BOOSTERS, INC. Principal Place of Business Mailing Address 1800 SECOND STREET, STE. 957 1800 SECOND STREET, STE. 957 SARASOTA, FL 34236 SARASOTA, FL 34236 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04092007 Cho-NP CR2E037 (12/06) City & State City & State 4. FEI Number 65-0552602 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HAGAN, DIANNE D 1800 SECOND STREET, STE. 957 Street Address (P.O. Box Number is Not Acceptable) SARASOTA, FL 34236 Zip Code City FL. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to \$5.00 May Be Trust Fund Contribution Florida Department of State Due by May 1, 2007 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE X Delete TITLE **X** Addition BARNES, ANITA NAME NAME Fernandez, Laura 3314 Island Date Circle STREET ADDRESS 4215 CONGREVE PL STREET ADDRESS CITY-S1-ZIP SARASOTA, FL 34241 CITY-ST-ZIP Sarasota, Florida 34232 COP THE Delete THILE **K** Addition BARNES, ANITA NAME Gohl, Judy 7115 Java Drive NAME STREET ADDRESS **4215 CONGREVE PLACE** STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34241 CITY-ST-ZIP <u>Sarasota. Florida 34241</u> TITLE TITLE Delete ☐ Change Addition LAMPEL, LISA NAME Beiler, Dawn STREET ADDRESS 2072 WEBBER STREET STREET ADDRESS 5731 Wachula Road CITY-\$1-ZIP SARASOTA, FL 34239 CITY-ST-ZIP <u>Myakka City, Florida</u> 34251 VΡ TITLE 11116 Delete ■ Addition GARRIOTT, JULIE NAME NAME 1150 DEBRECEN RD STREET ADDRESS STREET ADDRESS SARASOTA, FL 34240 CITY-ST-ZIP CHY-SI-ZIP Delete TITLE HILE ☐ Change ☐ Addition GARRIOTT, JULIE NAME STREET ADDRESS 1150 DEBRECEN ROAD STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34240 CITY-S1-ZIP HILE Delete TITLE Change ☐ Addition LIEB, MARION NAME NAME STREET ADDRESS 1012 SIRUS TRAIL STREET ADDRESS CITY-ST-7IP SARASOTA, FL 34239 CITY-S1-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or suppliemental 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 of powered 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.

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFIC OR DIRECTOR Laura Fernandez, As