2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0012416

DOCUMENT # N95000001602

1. Entity Name

TAMPA BAY TECHNICAL HIGH SCHOOL PARENTS BOOSTER CLUB, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 SEP 24 PM 3:58

Principal Place of Business	Mailing Address
6410 ORIENT ROAD TAMPA FL 33610	6410 ORIENT ROAD TAMPA FL 33610

☐ CHECK HERE IF MAKING CHANGES

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 59-3330734 ☐ 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
WOODS, BRAD 6410 ORIENT ROAD TAMPA FL 33610	Name Street Address (P.O. Box Number is Not Acceptable) 05/24/03 01079-001 **61.25 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE 400023312684 05/24/03 01079-001 **61.25
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
After September 10, 2003, min will be $236.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD POLEE, GEORGE 11500 SUMMIT WEST BLVD TAMPA FL 33617	☒ Delete	President Tob Trickey c/o Tampa Bay Tech 6410 Orient Rd, Tampa, FL 33610	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD CHIVERS, REX 3731 SOUTHVIEW DR. BRANDON FL 33511	☒ Delete	Treasurer Kathi Carlisle 5911 Riverhills Dr Temple Terrace, FL 33617	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD HERLOVICH, SHARON 8713 CHRIST COURT TAMPA FL 33637	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E037 (4/03)

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kathi Carlisle SIGNATURE REQUIRED Carlisle 9/22/03 813-978-2732