

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002751

FILED
Mar 23, 2012
Secretary of State

Entity Name: LABELLE LONGHORN BOOSTER CLUB, INC.

Current Principal Place of Business:

1287 LILLIAN STREET
LABELLE, FL 33935 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2335
LABELLE, FL 33975 US

New Mailing Address:

FEI Number: 65-4073079

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELVER, RALPH
301 WEST STATE ROAD 80
SUITE 201
LABELLE, FL 33935 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: PRES
Name: ZAVALA, JOSE MR.
Address: 169 CLAY STREET
City-St-Zip: LABELLE, FL 33935

Title: VP
Name: COX, SUSAN MRS.
Address: 27596 WILLOW LANE S.W.
City-St-Zip: LABELLE, FL 33935

Title: SEC
Name: COCHRAN, BRIDGETTE D MRS.
Address: 3732 ASPEN BLVD
City-St-Zip: LABELLE, FL 33935

Title: TRES
Name: COCHRAN, BRIDGETTE D MRS.
Address: 3732 ASPEN BLVD
City-St-Zip: LABELLE, FL 33935

Title: SCHO
Name: HULL, NIKKI MRS.
Address: 4025 BISHOP CIRCLE
City-St-Zip: LABELLE, FL 33935

I hereby 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 all other like empowered.

SIGNATURE: BRIDGETTE D. COCHRAN

TRES

03/23/2012

Electronic Signature of Signing Officer or Director

Date