

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2007 8:00 am
Secretary of State

04-02-2007 90087 032 ****70.00

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1. Entity Name
**BOOKER T. WASHINGTON HIGH SCHOOL GIRLS
SOCCER BOOSTER CLUB, INC.**



Principal Place of Business
**6000 COLLEGE PARKWAY
PENSACOLA, FL 32504**

Mailing Address
**6000 COLLEGE PARKWAY
PENSACOLA, FL 32504**

90090000



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03282007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
NOT APPLICABLE

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**PINDER, DAVID J
4534 WHISPER WAY
PENSACOLA, FL 32504**

7. Name and Address of New Registered Agent

Name **Kerry M. Langley**
Street Address (P.O. Box Number is Not Acceptable)
3385 NEWTON DR.
City **Pensacola** FL Zip Code **32503**

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

Kerry M. Langley

3-28-07

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
Due by May 1, 2007**

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

TITLE **VD** ☒ Delete
NAME **PINDER, DAVID J**
STREET ADDRESS **4534 WHISPER WAY**
CITY-ST-ZIP **PENSACOLA, FL 32504**

TITLE **TD** ☐ Delete
NAME **LANGLEY, KERRY**
STREET ADDRESS **3385 NEWTON DR.**
CITY-ST-ZIP **PENSACOLA, FL 32504**

TITLE **SD** ☐ Delete
NAME **COGGINS, GINA**
STREET ADDRESS **4220 LANGLEY AVE**
CITY-ST-ZIP **PENSACOLA, FL 32504**

TITLE **PD** ☐ Delete
NAME **GURNEY, CHP**
STREET ADDRESS **3445 LEMINGTON RD**
CITY-ST-ZIP **PENSACOLA, FL 32504**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Kerry M. Langley

3-28-07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #