

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000002413

**FILED**  
**Jan 20, 2004**  
**Secretary of State****Entity Name:** SEMINOLE HIGH SCHOOL ATHLETIC BOOSTERS CLUB, INC.**Current Principal Place of Business:**2701 RIDGEWOOD AVE.  
SANFORD, FL 32773**New Principal Place of Business:****Current Mailing Address:**2701 RIDGEWOOD AVE.  
SANFORD, FL 32773**New Mailing Address:****FEI Number:** 59-3394585**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**MCCOOL, DENNIS  
5306 VISTA CLUB RUN  
SANFORD, FL 32771 US**Name and Address of New Registered Agent:**MCCOOL, DENNIS  
1295 NORTH MARYLAND  
SANFORD, FL 32771 US

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: \_\_\_\_\_

01/20/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MCCOOL, DENNIS  
Address: 5306 VISTA CLUB RUN  
City-St-Zip: SANFORD, FL 32771

Title: TD ( ) Delete  
Name: SCHOMER, CHARLES  
Address: 106 FOXBRIDGE RUN  
City-St-Zip: LONGWOOD, FL 32750

Title: SD ( ) Delete  
Name: MOORE, SALLY  
Address: 3370 CHIO AVE  
City-St-Zip: SANFORD, FL 32773

Title: VP1D ( ) Delete  
Name: WARD, ROY  
Address: 990 MILLER DR  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: VP2D ( ) Delete  
Name: ROBERTSON, DON C  
Address: 5965 FEATHER LANE  
City-St-Zip: SANFORD, FL 32771

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP1D (X) Change ( ) Addition  
Name: LINDA, GARDNER  
Address: 108 MAPLEWOOD DR  
City-St-Zip: SANFORD, FL 32771

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: CHARLES SCHOMER

TD

01/20/2004

Electronic Signature of Signing Officer or Director

Date