

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000871

FILED
May 01, 2006
Secretary of State

Entity Name: EAST LAKE EAGLES WRESTLING BOOSTERS, INC.

Current Principal Place of Business:

1300 SILVER EAGLE DR
TARPON SPRINGS, FL 34689

New Principal Place of Business:

Current Mailing Address:

385 KNIGHT DRIVE
TARPON SPRINGS, FL 34688

New Mailing Address:

FEI Number: 59-3604020 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

RAY, MICHAEL
385 KNIGHT DRIVE
TARPON SPRINGS, FL 34688 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WORSHAM, VALERIE
Address: 5041 EDGEWATER LANE
City-St-Zip: OLDSMAR, FL 34677

Title: T () Delete
Name: RAY, MICHAEL
Address: 385 KNIGHT DRIVE
City-St-Zip: TARPON SPRINGS, FL 34688

Title: S () Delete
Name: WHITEHURST, BONNIE
Address: 899 CRESTRIDGE CIR
City-St-Zip: TARPON SPRINGS, FL 34688

Title: D () Delete
Name: COLLINS, PETER
Address: 1831 MARILYN DRIVE
City-St-Zip: CLEARWATER, FL 34619

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: () 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 Chapter 119, 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: MICHAEL RAY

T

05/01/2006

Electronic Signature of Signing Officer or Director

Date