2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004119

FILED Aug 26, 2009 Secretary of State

Entity Name: TAVARES HIGH SCHOOL ACADEMIC BOOSTERS, INC.

Current Principal Place of Business: New Principal Place of Business:

603 NORTH NEW HAMPSHIRE AVE 603 N. NEW HAMPSHIRE AVE

TAVARES, FL 32778 TAVARES, FL 32778

Current Mailing Address: New Mailing Address:

603 NORTH NEW HAMPSHIRE AVE 603 N. NEW HAMPSHIRE AVE

TAVARES, FL 32778 TAVARES, FL 32778

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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:

GLENN, MICHELLE GLENN, MICHELLE

C/O TAVARES HIGH SCHOO
603 NORTH NEW HAMPSHIRE AVE
TAVARES, FL 32778 US

C/O TAVARES HIGH SCHOOL
603 N. NEW HAMPSHIRE AVE
TAVARES, FL 32778 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: MICHELLE GLENN 08/26/2009

Electronic Signature of Registered Agent Date

City-St-Zip:

OFFICERS AND DIRECTORS:

TAVARES, FL 32778

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

TAVARES, FL 32778

itle: CD () Delete Title: CD (X) Change () Addition

 Name:
 GLOVER, RAE
 Name:
 HARBIN, TAMMY

 Address:
 603 N. NEW HAMPSHIRE
 Address:
 603 N. NEW HAMPSHIRE

 City-St-Zip:
 TAVARES, FL 32778
 City-St-Zip:
 TAVARES, FL 32778

Title: CD () Delete Title: CD (X) Change () Addition

Name: GLENN, MICHELE Name: SHIPLEY, DARLENE
Address: 603 N. NEW HAMPSHIRE AVE Address: 603 N. NEW HAMPSHIRE AVE

Title: CD () Delete Title: TD (X) Change () Addition

Name: HARBIN, TAMMY Name: GLENN, MICHELLE

Address: 603 N. NEW HAMPSHIRE AVE. Address: 603 N. NEW HAMPSHIRE AVE. City-St-Zip: TAVARES, FL 32778 City-St-Zip: TAVARES, FL 32778

Title: () Delete Title: SD () Change (X) Addition

Name: SLOVER, RAE
Address: Address: 603 N. NEW HAMPSHIRE AVE,

City-St-Zip: City-St-Zip: TAVARES, FL 32778

I hereby certify that the information supplied with this filing does not qualify 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: MICHELLE GLENN TD 08/26/2009