

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001280

FILED
Jun 28, 2009
Secretary of State

Entity Name: TARPON SPRINGS VOLLEYBALL BOOSTER CLUB, INC.

Current Principal Place of Business:

C/O TARPON SPRINGS HIGH SCHOOL
1411 GULF ROAD
TARPON SPRINGS, FL 34689

New Principal Place of Business:

Current Mailing Address:

C/O TARPON SPRINGS HIGH SCHOOL
1411 GULF ROAD
TARPON SPRINGS, FL 34689

New Mailing Address:

FEI Number: 59-3516912 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **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:

SHAFFER, REBECCA
C/O 1411 GULF ROAD
TARPON SPRINGS, FL 34689 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: DEROCKER, GINGER
Address: C/O 1411 GULF ROAD
City-St-Zip: TARPON SPRINGS, FL 34689

Title: VP () Delete
Name: DUBLINO, NORA
Address: C/O 1411 GULF ROAD
City-St-Zip: TARPON SPRINGS, FL 34689

Title: S () Delete
Name: COLLINS, DONNA
Address: C/O 1411 GULF RD
City-St-Zip: TARPON SPRINGS, FL 34689

Title: T () Delete
Name: SHAFFER, REBECCA
Address: C/O 1411 GULF RD
City-St-Zip: TARPON SPRINGS, FL 34683

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 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: REBECCA SHAFFER

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06/28/2009

Electronic Signature of Signing Officer or Director

Date