

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000001280

**FILED**  
**Apr 14, 2011**  
**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 ( )**

**Name and Address of Current Registered Agent:**

SANDS, IRENE  
C/O 1411 GULF ROAD  
TARPON SPRINGS, FL 34689 US

**Name and Address of New Registered Agent:**

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  
Name: SANDS, IRENE  
Address: C/O 1411 GULF ROAD  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: VP  
Name: COLLINS, DONNA  
Address: C/O 1411 GULF ROAD  
City-St-Zip: TARPON SPRINGS, FL 34689

I hereby 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 all other like empowered.

SIGNATURE: IRENE SANDS

P

04/14/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date