

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003918

FILED  
Apr 07, 2009  
Secretary of State

**Entity Name:** LYMAN HIGH SCHOOL ATHLETIC BOOSTER CLUB, INC.

**Current Principal Place of Business:**

865 SOUTH COUNTY ROAD 427  
LONGWOOD, FL 32750

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 521283  
LONGWOOD, FL 32752

**New Mailing Address:**

**FEI Number:** 20-5119617

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GRUBER, FRED  
740 FLORIDA CENTRAL PARKWAY  
SUITE 2042  
LONGWOOD, FL 32750 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 ( ) Delete  
Name: LEE, KELVIN  
Address: 2287 SPRINGS LANDING BLVD  
City-St-Zip: LONGWOOD, FL 32779

Title: VP ( ) Delete  
Name: LANGE, BRIAN  
Address: 202 CLYDESDALE CIRCLE  
City-St-Zip: SANFORD, FL 32773

Title: S ( ) Delete  
Name: KILLACKY, KIM  
Address: 329 RIDGEWOOD ST  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: T ( ) Delete  
Name: GRUBER, FRED  
Address: 740 FLORIDA CENTRAL PARKWAY, SUITE 2042  
City-St-Zip: LONGWOOD, FL 32750

**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: KELVIN V. LEE

P

04/07/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date