

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004106

FILED
Apr 24, 2004
Secretary of State**Entity Name:** S.W. FLORIDA ALL-STAR CHEERLEADERS, INC.**Current Principal Place of Business:**6410 ARC WAY-B
FORT MYERS, FL 33912**New Principal Place of Business:****Current Mailing Address:**6410 ARC WAY-B
FORT MYERS, FL 33912**New Mailing Address:****FEI Number:** 65-0875856**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**GLATZ, CONNIE
3401 WINKLER AVE EXT APT 114
FORT MYERS, FL 33916 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:** DPT () Delete
Name: GLATZ, CONNIE
Address: 3401 WINKLER AVE EXT. APT 114
City-St-Zip: FORT MYERS, FL 33916**Title:** DVPS () Delete
Name: GLATZ, TANYA
Address: 3401 WINKLER AVE EXT APT 114
City-St-Zip: FORT MYERS, FL 339168406**Title:** D () Delete
Name: SMALLUCK, CHRIS
Address: 718 EDISON AVE
City-St-Zip: LEHIGH ACRES, FL 33936**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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CONNIE GLATZ

DPT

04/24/2004

Electronic Signature of Signing Officer or Director

Date