NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 27, 2002 8:00 am
Secretary of State
05-27-2002 90326 046 ****61.25

DOCUMENT # N98000004477

1. Entity Name
Wildcat Band Boosters, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
10600 Okeechobee Blvd	1128 Royal Palm Beach Blvd.
Suite, Apt. #, etc.	Suite, Apt. #, etc. #272
City & State: Royal Palm Beach, FL	City & State: Royal Palm Beach, FL
Zip: 33411 Country: USA	Zip: 33411 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-0885251 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Lois Holy

Street Address (P.O. Box Number is Not Acceptable): 15057 - 77th Place North

Loxahatchee, FL

City: Loxahatchee **FL** Zip Code: 33470

8. 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: Lois Holy . Lois Holy, Financial Secretary 4/30/02
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

FEE IS $61.25 Initial or Amended UBR

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	Billy M. Schmidt
STREET ADDRESS	1815 Kerry Lane
CITY-ST-ZIP	Loxahatchee, FL 33470
TITLE	V
NAME	Larry L. Koester
STREET ADDRESS	8613-7th Place South
CITY-ST-ZIP	West Palm Beach, FL 33411
TITLE	T
NAME	Candice B. Ashurst
STREET ADDRESS	13132-85th Road North
CITY-ST-ZIP	West Palm Beach, FL 33412
TITLE	S
NAME	Debra Conner
STREET ADDRESS	10679 Misty Lane
CITY-ST-ZIP	Royal Palm Beach, FL 33411
TITLE	D
NAME	Lois Holy
STREET ADDRESS	15057-77th Place North
CITY-ST-ZIP	Loxahatchee, FL 33470
TITLE	D
NAME	Cindi Romano
STREET ADDRESS	103 Greenwood Place
CITY-ST-ZIP	Royal Palm Beach, FL 33411

DO NOT WRITE IN THIS SPACE

CR2E037B (12/01)

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or on an attachment with all other like empowered.

SIGNATURE: Candice B. Ashurst Candice B. Ashurst, Treasurer 4/30/02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

561-722-6838
Daytime Phone #