

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N98000004477

FILED  
Apr 30, 2003  
Secretary of State

Entity Name: WILDCAT BAND BOOSTERS, INC.

## Current Principal Place of Business:

10600 OKEECHOBEE BLVD.  
ROYAL PALM BEACH, FL 33411

## New Principal Place of Business:

## Current Mailing Address:

1128 ROYAL PALM BEACH BLVD  
PMB 272  
ROYAL PALM BEACH, FL 33411

## New Mailing Address:

FEI Number: 65-0885251

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HOLY, LOIS  
15057 77TH PLACE NORTH  
LOXAHATCHEE, FL 33470

## 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: SCHMIDT, BILLY  
Address: 1815 KERRY LANE  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: D ( ) Delete  
Name: ROMANO, CINDI  
Address: 103 GREENWOOD PLACE  
City-St-Zip: ROYAL PALM BCH, FL 33411

Title: T ( ) Delete  
Name: ASHURST, CANDICE R  
Address: 13132 - 85TH RD N.  
City-St-Zip: WEST PALM BEACH, FL 33412

Title: V ( ) Delete  
Name: KOESTER, LARRY L  
Address: 8613 7TH PLACE SOUTH  
City-St-Zip: WEST PALM BEACH, FL 33411

Title: D ( ) Delete  
Name: HOLY, LOIS  
Address: 15057 77TH PLACE NORTH  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: S ( ) Delete  
Name: CONNER, DEBRA  
Address: 10679 MISTY LN  
City-St-Zip: ROYAL PALM BEACH, FL 33411

## 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:

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: CANDICE ASHURST

T

04/30/2003

Electronic Signature of Signing Officer or Director

Date