

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004693

FILED
Apr 30, 2008
Secretary of State

Entity Name: DUNEDIN HIGH SCHOOL CHEERLEADERS BOOSTERS, INC.

Current Principal Place of Business:

DUNEDIN HIGH SCHOOL
1651 PINEHURST RD
DUNEDIN, FL 34698

New Principal Place of Business:

Current Mailing Address:

DUNEDIN HIGH SCHOOL
1651 PINEHURST RD
DUNEDIN, FL 34698

New Mailing Address:

FEI Number: 59-3532679

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOHOFF, CHRISTINE
3413 ROCHELLE CT
CLEARWATER, FL 33761 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: PT () Delete
Name: LADD, MICHELLE
Address: 1089 GLENWOOD DR
City-St-Zip: DUNEDIN, FL 34698

Title: VT () Delete
Name: DIMILTAW, SHANNON
Address: 1239 FLACON DR
City-St-Zip: DUNEDIN, FL 34698

Title: TT () Delete
Name: MOHOFF, CHRISTINE
Address: 3413 ROCHELLE CT
City-St-Zip: CLEARWATER, FL 33761

Title: ST () Delete
Name: ELKINS, CINDY
Address: 427 NORFOLK ST
City-St-Zip: DUNEDIN, FL 346898

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: CHRISTINE MOHOFF

TT

04/30/2008

Electronic Signature of Signing Officer or Director

Date