2002 UNIFORM BUSINESS REPORT (UBR) FILED May 16, 2002 8:00 am Secretary of State DOCUMENT # N9800005885 1. Entity Name DUNEDIN HIGHLAND MIDDLE SCHOOL CHEERLEADING BOOS 05-16-2002 90019 044 ****61.25 TERS, INC. Principal Place of Business Mailing Address 896 UNION ST. 896 UNION ST. **DUNEDIN FL 34698 DUNEDIN FL 34698** Daraaiai 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3680628 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required -6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent <u>immons</u> Street Address (P.O. Box Number is Not Acceptable) HERRICK, MARILYN 1017 SAN SALVADOR DR **DUNEDIN FL 34698** City 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 (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE Change ☐ Addition CR2E037 (9/01 JONES, SANDRA BURE, SARA NAME NAME 1856 LA GRANDE STREET ADDRESS STREET ADDRESS 519 GIZAYS CIFCK CITY-ST-ZIP Dunedin Fl. 34698 CITY-ST-ZIP povegiu. TITLE ☐ Delete TITLE way, Barbara Change Addition RICCARDO, MARY A NAME NAME 314 CIVAD Frei 1502 SEASPRAY LANE STREET. ADORESS STREET ADDRESS Dunedin, FL 34698 **DUNEDIN FL 34698** CITY-ST-7IP CITY-ST-7IP TITLE ☐ Delete TITLE simmons, DAWN Change ☐ Addition SWEENEY, CYNTHIA K NAME NAME 1237 ROYEL OOK DR **82 LEXINGTON DR** STREET ADDRESS STREET ADDRESS Dunedin, FL 34698 **DUNEDIN FL 34698** CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition Change **DUNDEE, CATHY** NAME NAME 2510 ROLLING VIEW DR STREET ADDRESS STREET ADDRESS **DUNEDIN FL 34698** CITY-ST-ZIP CITY-ST-ZIP DP ☐ Delete TITLE ☐ Change ☐ Addition CHAISSON, CINDY NAME 1140 MCFARLAND ST STREET ADDRESS STREET ADDRESS **DUNEDIN FL 34698** CITY-ST-ZIP CITY-ST-ZIP TIT! F ☐ Delete ☐ Addition TITI F Change HERRICK, MARILYN R NAME NAME 1017 SAN SALVADOR DR STREET ADDRESS STREET ADDRESS **DUNEDIN FL 34698** CITY-ST-76 CITY-ST-ZIP

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 Block 11 if

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachment with an address, with all other like empowered

4/15/02

727-251-71064

Daytime Phone #