## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000006140

Entity Name: TORNADO SPIRIT BOOSTERS, INC.

FILED Aug 17, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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540 S. HERCULES CLEARWATER, FL 33675

**Current Mailing Address: New Mailing Address:** 

540 S. HERCULES CLEARWATER, FL 33675

FEI Number: 59-3456704 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ICENOGLE, ZORINA W C/O CLEARWATER HIGH SCHOOL 540 S. HERCULES CLEARWATER, FL 33765 US

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:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition MACKAY, DEBRA ARDIS, KAREN Name: Name:

2281 MANOR BLVD Address: 1405 CRESTWOOD COURT Address: City-St-Zip: CLEARWATER, FL 33765 City-St-Zip: SAFETY HARBOR, FL 34695

(X) Change ( ) Addition Title: ( ) Delete Title: Name: GREEN, ROBIN Name: STELLMACH, DAWN M

Address: 1001 N GREENWOOD AVE. Address: 806 S. HERCULES AVENUE City-St-Zip: CLEARWATER, FL 33755 City-St-Zip: CLEARWATER, FL 33765

Title: () Delete Title: TRE (X) Change ( ) Addition

FERGUSON, ANNETTE MOKWA, KIM Name: Name: 1744 EMERALD DR. 831 BERKLEY PLACE Address: Address: CLEARWATER, FL 33756 City-St-Zip: City-St-Zip: CLEARWATER, FL 33765

Title: SD () Delete Title: SEC (X) Change ( ) Addition

Name: JAKUBZAK, SUE Name: HARP, BECKY 963 MCKINNLEY STREET Address: 935 LAKE FOREST RD. Address: City-St-Zip: CLEARWATER, FL 33765 City-St-Zip: CLEARWATER, FL 33756

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: ANNETTE FERGUSON **TRE** 08/17/2005