

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006140

FILED
Apr 21, 2009
Secretary of State

Entity Name: TORNADO SPIRIT BOOSTERS, INC.

Current Principal Place of Business:

540 S. HERCULES
CLEARWATER, FL 33764

New Principal Place of Business:

Current Mailing Address:

540 S. HERCULES
CLEARWATER, FL 33764

New Mailing Address:

FEI Number: 59-3456704

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ICENOGL, ZORINA W
C/O CLEARWATER HIGH SCHOOL
540 S. HERCULES
CLEARWATER, FL 33764 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: PD () Delete
Name: LECROY, DAWN
Address: 1351 YULEE DRIVE
City-St-Zip: CLEARWATER, FL 33764

Title: VPD () Delete
Name: BERRY, HOLLY
Address: 1904 OAKDALE LANE SOUTH
City-St-Zip: CLEARWATER, FL 33764

Title: TRE () Delete
Name: DIPOLITO, MARY
Address: 2305 HARN BLVD
City-St-Zip: CLEARWATER, FL 33764

Title: SEC () Delete
Name: ADAMS, BONITA
Address: 1069 PORTER DRIVE
City-St-Zip: LARGO, FL 33771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: MAYEUX, ELIZABETH
Address: 2257 GRANGER DRIVE
City-St-Zip: CLEARWATER, FL 33765

Title: TRE (X) Change () Addition
Name: NEWMAN, MARY
Address: 685 IMPERIAL DRIVE
City-St-Zip: LARGO, FL 33771

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: DAWN LECROY

PD

04/21/2009

Electronic Signature of Signing Officer or Director

Date