2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2007
Secretary of State

DOCUMENT# N98000006241

Entity Name: ST. PETERSBURG HIGH SCHOOL IB BOOSTERS, INC.

Current Principal Place of Business:

2501 5TH AVE. NORTH
ST. PETERSBURG, FL 33713

New Principal Place of Business:

Current Mailing Address:

2501 5TH AVE. NORTH
ST. PETERSBURG, FL 33713

New Mailing Address:

FEI Number: 59-3570583 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCPHERON, LINDA DR.
2501 5TH AVE. NORTH
ST. PETERSBURG, FL 33713 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: D/C ( ) Delete
Name: MILLER, LINDA
Address: 2501 5TH AVENUE N
City-St-Zip: SAINT PETERSBURG, FL 33713

Title: DT ( ) Delete
Name: LOVERING, DORIS
Address: 2501 5TH AVENUE N
City-St-Zip: SAINT PETERSBURG, FL 33713

Title: D ( ) Delete
Name: MCPHERON, LINDA PHD
Address: 2501 5TH AVE N
City-St-Zip: ST PETERSBURG, FL

Title: DS ( ) Delete
Name: MCLAUGHLIN, MILLIE
Address: 2501 5TH AVE N.
City-St-Zip: SAINT PETERSBURG, FL 33713

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/C (X) Change ( ) Addition
Name: PORTERFIELD, LYNN
Address: 2501 5TH AVENUE N
City-St-Zip: SAINT PETERSBURG, FL 33713

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 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: DORIS LOVERING DT 02/27/2007

Electronic Signature of Signing Officer or Director — Date