

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 09, 2003 8:00 am
Secretary of State

03-13-2003 90057 034 ****61.25

DOCUMENT # N98000006754

1. Entity Name

**DUNEDIN HIGH SCHOOL BOYS BASKETBALL BOOSTER CLUB
, INC.**



Principal Place of Business

**1651 PINEHURST RD
DUNEDIN FL 34698**

Mailing Address

**1286 STONEY BROOK LN
DUNEDIN FL 34698**

2. Principal Place of Business

3. Mailing Address

1651 Pinehurst Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Dunedin, FL

Zip

Country

Zip

34698

Country

USA

4. FEI Number **59-3548610**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**BODDEN, GENE P
1286 STONEY BROOK LN
DUNEDIN FL 34698**

7. Name and Address of New Registered Agent

Name

Greg Zornes

Street Address (P.O. Box Number is Not Acceptable)

1285 DeLeon Ct.

City

Palm Harbor Dunedin

FL

Zip Code

34698

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

X Greg Zornes

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **DP BODDEN, GENE P**
STREET ADDRESS **1286 STONEY BROOK LN**
CITY-ST-ZIP **DUNEDIN FL 34698**

TITLE ☐ Delete
NAME **DVP ANDERSON, DEAN**
STREET ADDRESS **2046 BRENDA RD**
CITY-ST-ZIP **CLEARWATER FL 33755**

TITLE ☐ Delete
NAME **DST SCHAIBLY, SHERRY**
STREET ADDRESS **989 SAN SALVADOR DR**
CITY-ST-ZIP **DUNEDIN FL 34698**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition
NAME **President Greg Zornes**
STREET ADDRESS **1285 DeLeon Ct.**
CITY-ST-ZIP **Palm Harbor, FL 34698** **(D)**

TITLE ☒ Change ☐ Addition
NAME **Vice President Tony Poole**
STREET ADDRESS **1070 Prestwick Place**
CITY-ST-ZIP **Dunedin, FL 34698** **(D)**

TITLE ☐ Change ☐ Addition
NAME **SAME** **(D)**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *X*

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-4-03

Date

547-7717

Daytime Phone #

CR2E037 (10/02)