

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000007094

FILED
Apr 30, 2008
Secretary of State

Entity Name: HURRICANE "HOOPS" BOOSTER CLUB OF PALM HARBOR, INC.

Current Principal Place of Business:

1900 OMAHA STREET
PALM HARBOR, FL 34683

New Principal Place of Business:

Current Mailing Address:

1900 OMAHA STREET
PALM HARBOR, FL 34683

New Mailing Address:

FEI Number: 59-3563000

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALTERS, MICHAEL F
1900 OMAHA STREET
PALM HARBOR, FL 34683 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: PURDY, ROBIN P
Address: 930 WISCONSIN AVE
City-St-Zip: PALM HARBOR, FL 34683 US

Title: VP () Delete
Name: LANE, PAMELA
Address: 2656 FINCH CT
City-St-Zip: PALM HARBOR, FL 34684

Title: SD () Delete
Name: STEVENSON, ROBERT
Address: 3078 WOODSONG LANE
City-St-Zip: CLEARWATER, FL 33761

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: TR () Change (X) Addition
Name: TAVOULARIS, PAIGE L
Address: 1827 MARYS MEADOW LANE
City-St-Zip: PALM HARBOR, FL 34683

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: PAIGE L. TAVOULARIS

TR

04/30/2008

Electronic Signature of Signing Officer or Director

_____ Date