

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000007226

FILED
Apr 25, 2008
Secretary of State

Entity Name: DUNEDIN HIGH SCHOOL TOUCHDOWN BOOSTER CLUB, INC.

Current Principal Place of Business:

1651 PINEHURST ROAD
DUNEDIN, FL 34698

New Principal Place of Business:

Current Mailing Address:

1651 PINEHURST ROAD
DUNEDIN, FL 34698

New Mailing Address:

FEI Number: 26-1616696

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EVERETT, MARK
1651 PINEHURST ROAD
DUNEDIN, FL 34698 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: MCKEON, BOB
Address: 4 EAGLE LANE
City-St-Zip: PALM HARBOR, FL 34683

Title: VPD () Delete
Name: FROST, CAREY
Address: 1220 BLUFFS CIRCLE
City-St-Zip: DUNEDIN, FL 34698

Title: STD () Delete
Name: SCHMIDT, DEE
Address: 153 NEW YORK AVE, UNIT B
City-St-Zip: DUNEDIN, FL 34698

Title: PAD () Delete
Name: KRAMER, ROBERT
Address: 1215 DINNERBELL LANE
City-St-Zip: DUNEDIN, FL 34698

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CHESSON, PHILLIP G
Address: 1471 NOELL BLVD
City-St-Zip: PALM HARBOR, FL 34683

Title: VPD (X) Change () Addition
Name: MCKEON, BOB
Address: 4 EAGLE LANE
City-St-Zip: PALM HARBOR, FL 34683

Title: SD (X) Change () Addition
Name: CHESSON, GINA G
Address: 1471 NOELL BLVD
City-St-Zip: PALM HARBOR, FL 34683

Title: TD (X) Change () Addition
Name: SCHMIDT, DEE
Address: 671 DEXTER DRIVE
City-St-Zip: DUNEDIN, FL 34698

Title: PAD () Change (X) Addition
Name: KRAMER, ROBERT
Address: 1215 DINNERBELL LANE
City-St-Zip: DUNEDIN, FL 34698

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: DEE SCHMIDT

TD

04/25/2008

Electronic Signature of Signing Officer or Director

Date