2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000699

Apr 24, 2008 Secretary of State

Entity Name: TARPON SPRINGS HIGH SCHOOL VETERINARY SCIENCE ACADEMY BOOSTERS, INC.

Current Principal Place of Business: New Principal Place of Business:

1411 GULF ROAD WEST TARPON SPRINGS, FL 34689

Current Mailing Address: New Mailing Address:

1411 GULF ROAD TARPON SPRINGS, FL 34689

FEI Number: 59-3557583 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BEVERLY, SANDRA 4221 TALL OAK LANE NEW PORT RICHEY, FL 34653 US

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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition SCOURAS, BARBARA POTEET, AMY Name: Name: 980 14TH AVENUE Address: 31 OAK AVENUE Address:

City-St-Zip: SAFETY HARBOR, FL 34695 City-St-Zip: PALM HARBOR, FL 34684

Title: VPD Title: (X) Change () Addition () Delete POTEET, AMY Name: GOLDSTEIN, MARSHA Name: Address: 309 CONGRESS ST. Address: 3060 ARBOR OAKS DRIVE City-St-Zip: OLDSMAR, FL 34677 City-St-Zip: TARPON SPRINGS, FL 34688

Title: () Delete Title: () Change () Addition

BEVERLY, SANDRA Name: Name: 4221 TALL OAKLANE Address: Address: City-St-Zip: NEW PORT RICHEY, FL 34653 City-St-Zip:

Title: SD () Delete Title: SD (X) Change () Addition

HARRIS, SUE Name: Name: HARGREAVES, MARY Address: 1468 LAKEVIEW DRIVE Address: 1883 DELORO COURT TARPON SPRINGS, FL 34689 City-St-Zip: 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: SANDRA BEVERLY TD 04/24/2008