2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# N99000001096

Entity Name: FLORIDA PANTHERS BOOSTER CLUB, INC.

Current Principal Place of Business:

ONE PANTHER PARKWAY
SUNRISE, FL 33323

New Principal Place of Business:

Current Mailing Address:

ONE PANTHER PARKWAY
SUNRISE, FL 33323

New Mailing Address:

FEI Number: 65-0898689 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

AMERICAN INFORMATION SERVICES, INC.
ONE S.E. 3RD AVENUE, 28TH FLOOR
MIAMI, FL 33131 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: PR ( ) Delete
Name: ENGLISH, DOUG
Address: ONE PANTHER PKWY
City-St-Zip: SUNRISE, FL 33323

Title: VP ( ) Delete
Name: DODSON, KATHY
Address: ONE PANTHER PKWY
City-St-Zip: SUNRISE, FL 33323

Title: T ( ) Delete
Name: CURBELO, MAGDALENA
Address: ONE PANTHER PKWY
City-St-Zip: SUNRISE, FL 33323

Title: D ( ) Delete
Name: MOLLER, RANDY
Address: ONE PANTHER PKWY
City-St-Zip: SUNRISE, FL 33323

Title: D ( ) Delete
Name: MARSHALL, JEAN
Address: ONE PANTHER PKWY
City-St-Zip: SUNRISE, FL 33323

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PR (X) Change ( ) Addition
Name: LAPALME, CHERYL
Address: ONE PANTHER PKWY
City-St-Zip: SUNRISE, FL 33323

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: D (X) Change ( ) Addition
Name: CROWHURST, PHIL
Address: ONE PANTHER PKWY
City-St-Zip: SUNRISE, FL 33323

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: KATHY DODSON VP 04/30/2007

Electronic Signature of Signing Officer or Director — Date