

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002011

FILED
Jul 15, 2009
Secretary of State

Entity Name: LAWTON CHILES HIGH SCHOOL SPORTS BOOSTERS, INC.

Current Principal Place of Business:

7200 LAWTON CHILES LANE
TALLAHASSEE, FL 32312

New Principal Place of Business:

Current Mailing Address:

7200 LAWTON CHILES LANE
TALLAHASSEE, FL 32312

New Mailing Address:

FEI Number: 59-3573214 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

COX, ALAN
7200 LAWTON CHILES LANE
TALLAHASSEE, FL 32312 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: COX, ALAN
Address: 7200 LAWTON CHILES LANE
City-St-Zip: TALLAHASSEE, FL 32312

Title: D () Delete
Name: LAMBERT, PAUL
Address: 7200 LAWTON CHILES LANE
City-St-Zip: TALLAHASSEE, FL 32312

Title: D () Delete
Name: SWANSON, LORI
Address: 2982 UMBERLAND DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

Title: P () Delete
Name: LINGERFELT, MATT
Address: 1358 ROBIN KAY ROAD
City-St-Zip: TALLAHASSEE, FL 32312

Title: T () Delete
Name: BASS, CATHI
Address: 1322 MANOR HOUSE DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

Title: S () Delete
Name: THEOBALD, BARB
Address: 3208 HORSESHOE TRAIL
City-St-Zip: TALLAHASSEE, FL 32312

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

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

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

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: PAUL LAMBERT

D

07/15/2009

Electronic Signature of Signing Officer or Director

Date