

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002355

FILED
Feb 04, 2007
Secretary of State

Entity Name: WELLINGTON LADIES' LACROSSE BOOSTERS, INC.

Current Principal Place of Business:

P.O. BOX 894
LOXAHATCHEE, FL 33470 US

New Principal Place of Business:

15360 DEHAVILLAND COURT
WELLINGTON, FL 33470 US

Current Mailing Address:

P.O. BOX 894
LOXAHATCHEE, FL 33470 US

New Mailing Address:

FEI Number: 65-0923084 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BRINT, VICKIE
15360 DEHAVILLAND CT.
WELLINGTON, FL 33414 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: BRINT, VICKIE
Address: 15360 DEHAVILLAND COURT
City-St-Zip: WELLINGTON, FL 33414

Title: D () Delete
Name: POZA, MIKE
Address: 13639 COLUMBINE AVENUE
City-St-Zip: WELLINGTON, FL 33414

Title: VPD () Delete
Name: BLOUIN, DAVE
Address: 11630 LAUREL VALLEY CIRCLE
City-St-Zip: WELLINGTON, FL 33414

Title: SD () Delete
Name: ROBB, RALPH
Address: 12474 SUNNY WAY COURT
City-St-Zip: WELLINGTON, FL 33414

Title: TD () Delete
Name: KURTZ, JEFFREY
Address: 15960 PINE STRAND CT.
City-St-Zip: WELLINGTON, FL 33414

Title: D () Delete
Name: SIEGEL, SHUKO
Address: 189 WARM SPRINGS TERRACE
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: BLOUIN, BEATRICE
Address: 11630 LAUREL VALLEY CIRCLE
City-St-Zip: WELLINGTON, FL 33414

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 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: VICKIE BRINT

PD

02/04/2007

Electronic Signature of Signing Officer or Director

Date