2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003160

FILED Apr 30, 2009 Secretary of State

Entity Name: BTWHS CHEERLEADING BOOSTER ASSOCIATION, INC.

Current Principal Place of Business:

% BOOKER T. WASHINGTON HIGH SCHOOL 6000 COLLEGE PARKWAY

PENSACOLA, FL 32503

Current Mailing Address:

% BOOKER T. WASHINGTON HIGH SCHOOL 6000 COLLEGE PARKWAY

PENSACOLA, FL 32503

FEI Number: 59-3577383

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

6000 COLLEGE PARKWAY

PENSACOLA, FL 32504

New Mailing Address:

6031 CHAPMAN CIRCLE

PENSACOLA, FL 32504

New Principal Place of Business:

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

% BOOKER T. WASHINGTON HIGH SCHOOL

% BOOKER T. WASHINGTON HIGH SCHOOL

HURST, TONYA 6031 CHAPMAN CIRCLE US PENSACOLA, FL 32504

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:

() Delete

FRANZONE, BETTY JO Name: 915 KENNY DRIVE Address: City-St-Zip: PENSACOLA, FL 32504

Title: () Delete RITTER, ROBIN Name: Address: 5970 OSPREY PLACE City-St-Zip: PENSACOLA, FL 32504

Title: () Delete TRUXILLO, KATHY Name: 4391 LA MIRAGE DRIVE Address: City-St-Zip: PENSACOLA, FL 32504

Title: (X) Delete Name: HURST, TONYA

6031 CHAPMAN CIRCLE Address: City-St-Zip: PENSACOLA, FL 32504

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

DEMET, BRENDA Name:

Address: 1211 NORTHBROOK DRIVE City-St-Zip: PENSACOLA, FL 32504

Title: (X) Change () Addition

Name: PEYTON, TRACY Address: 8500 PUNTA LORA City-St-Zip: PENSACOLA, FL 32504

Title: (X) Change () Addition

HURST, TONYA Name: 6031 CHAPMAN CIRCLE Address: City-St-Zip: PENSACOLA, FL 32504

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: TONYA HURST **TREA** 04/30/2009