

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003545

FILED
Sep 03, 2008
Secretary of State

Entity Name: ST. AUGUSTINE HIGH SCHOOL FOOTBALL BOOSTERS, INC.

Current Principal Place of Business:

3205 VARELLA AVE
FOOTBALL STADIUM
SAINT AUGUSTINE, FL 32095 US

New Principal Place of Business:

3205 VARELLA AVE
FOOTBALL STADIUM
SAINT AUGUSTINE, FL 32084 US

Current Mailing Address:

P.O. BOX 1771
SAINT AUGUSTINE, FL 32085 US

New Mailing Address:

FEI Number: 52-2180281 **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:

DAVIS, BRAD
17 PACIFIC ST STE A
ST. AUGUSTINE, FL 32084 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: MEESE, ROY
Address: 1302 PRINCE RD
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: PD () Delete
Name: GUMBLE, JEANIE
Address: 14 HYBISCUS AVE
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: SD () Delete
Name: DEFORE, TRACY
Address: 2412 KACIE LANE
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: TD () Delete
Name: LEWIS, SHERI
Address: 153 MEADOW AVE
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: VD (X) Delete
Name: DEFORE, DURANDY
Address: 2412 KACIE LANE
City-St-Zip: SAINT AUGUSTINE, FL 32084

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: GUMBLE, JEANNIE
Address: 3810 MYRTLE STREET
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: SD (X) Change () Addition
Name: POWERS, TWILA
Address: 3385 KINGS ROAD SOUTH
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: TD (X) Change () Addition
Name: LEWIS, SHERI P
Address: 153 MEADOW AVE
City-St-Zip: SAINT AUGUSTINE, FL 32084

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: SHERI P. LEWIS

TD

09/03/2008

Electronic Signature of Signing Officer or Director

Date