

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005358

FILED
Sep 20, 2004
Secretary of State

Entity Name: CLEARWATER HIGH SCHOOL VOLLEYBALL BOOSTER CLUB, INC.

Current Principal Place of Business:

540 S. HERCULES AVE.
CLEARWATER, FL 33764

New Principal Place of Business:

Current Mailing Address:

540 S. HERCULES AVE.
CLEARWATER, FL 33764

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FISHER, BETH ANN
2075 ENVOY CT.
CLEARWATER, FL 33764 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: FISHER, BETH ANN
Address: 2075 ENVOY CT
City-St-Zip: CLEARWATER, FL 33764

Title: VPD () Delete
Name: BETOURNE, JUDY
Address: 804 RICHARDS AVE.
City-St-Zip: CLEARWATER, FL 33775

Title: TD () Delete
Name: CASE, GRACE
Address: 1155 GLENMOOR CT
City-St-Zip: CLEARWATER, FL 33764

Title: SD () Delete
Name: HEGH, CAROL
Address: 2125 LAKEVIEW ROAD
City-St-Zip: CLEARWATER, FL 33764

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BETH ANN FISHER

PRES

09/20/2004

Electronic Signature of Signing Officer or Director

Date