2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005922

FILED Mar 02, 2009 Secretary of State

Entity Name: COUNTRYSIDE HIGH SCHOOL CHEERLEADING BOOSTER CLUB, INC.

Current Principal Place of Business: New Principal Place of Business:

COUNTRYSIDE HIGH SCHOOL 3000 STATE ROAD 580 CLEARWATER, FL 33761

Current Mailing Address: New Mailing Address:

COUNTRYSIDE HIGH SCHOOL 3000 STATE ROAD 580 CLEARWATER, FL 33761

FEI Number: 59-3608478 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KAILING, ANITA M
1705 ANGLERS COURT
SAFETY HARBOR, FL 34695 US
GANCI, VIOLET R
2676 FRISCO DRIVE
CLEARWATER, FL 33761 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: VIOLET GANCI 03/02/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: () Change () Addition Name: FISLER, LISA Name:

Name:FISLER, LISAName:Address:1119 KNOLLWOOD DR.Address:City-St-Zip:SAFETY HARBOR, FL 34695 USCity-St-Zip:

Title: VPD () Delete Title: VPD (X) Change () Addition Name: LINKFIELD, DONNA Name: GIBSON, ROGER S

Address: 1885 COUNTY ROAD 193 Address: 1723 LA FOREST AVE.

City-St-Zip: CLEARWATER, FL 33759 US City-St-Zip: SAFETY HARBOR, FL 34695 US

Title: SD () Delete Title: SD (X) Change () Addition Name: EYE, JODE Name: FLORO, MARIE

Address: 3141 MASTERS DRIVE Address: 280 CYPRESS PLACE
City-St-Zip: CLEARWATER, FL 33761 US City-St-Zip: OLDSMAR, FL 34677 US

Name:KAILING, ANITA MName:GANCI, VIOLET RAddress:1705 ANGLERS COURTAddress:2676 FRISCO DRIVECity-St-Zip:SAFETY HARBOR, FL 34695 USCity-St-Zip:CLEARWATER, FL 33761 US

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: VIOLET GANCI T 03/02/2009