

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N99000006093		
1. Entity Name TEAM PARENTS BOOSTER CLUB, INC.		

FILED

04 AUG -4 PM 1:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 4365 OKEECHOBEE BLVD. B-4 WEST PALM BEACH, FL 33409	Mailing Address 4365 OKEECHOBEE BLVD. B-4 WEST PALM BEACH, FL 33409
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



07252004 Chg-NP CR2E037 (10/03)

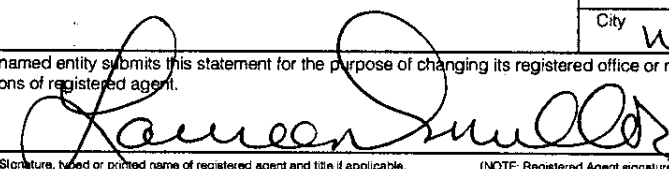
4. FEI Number
65-0972854

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent PATT, RONALD S 4365 OKEECHOBEE BLVD #B-4 WEST PALM BEACH, FL 33409		7. Name and Address of New Registered Agent	
		Name LAUREEN MULLER	
		Street Address (P.O. Box Number is Not Acceptable) 4365 Okeechobee Blvd	
		# B4	
		City West Palm Beach FL Zip Code	

8. 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. I am familiar with, and accept the obligations of registered agent.

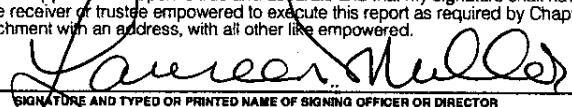
SIGNATURE  DATE **7/23/04**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SAX, BONNIE L 5270 DESERT VIXEN RD PALM BEACH GARDENS, FL 33418 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT NAIDZUK, KARNELLA ☒ Change ☒ Addition 112 BOWSPIRIT DR North Palm Beach, FL 33408
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ALLWINE, LAWRENCE 18889 SYCAMORE DR LOXAHATCHEE, FL 33470 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT NAIDZUK, KARNELLA ☒ Change ☒ Addition 112 BOWSPIRIT DR North Palm Beach, FL 33408
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILLARD, TAMMY 6885 ISLAND DR PALM BEACH GARDENS, FL 33418 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER LAUREEN MULLER ☒ Change ☒ Addition 12272 68th St. N West Palm Beach, FL 33412
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LANGMEYER, TINA 17454 42ND RD N LOXAHATCHEE, FL 33470 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secy LAUREEN MULLER ☐ Change ☒ Addition 12272 68th St. N West Palm Beach, FL 33412
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NAIDZUK, KARNELLA ☐ Delete 112 BOWSPIRIT DR NORTH PALM BEACH, FL 33408	TITLE NAME STREET ADDRESS CITY-ST-ZIP	08/05/04 01063-001 \$61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	000039913530 08/05/04-01063-001 \$61.25

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  DATE **7/23/04** 561-686-5687

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR