2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007357

FILED Apr 17, 2007 Secretary of State

Entity Name: PALM HARBOR UNIVERSITY HIGH SCHOOL HURRICANES SOCCER BOOSTERS, INC.

Current Principal Place of Business: New Principal Place of Business: 2872 SEA PINES CIRCLE WEST CLEARWATER, FL 33761 **Current Mailing Address: New Mailing Address:** 2872 SEA PINES CIRCLE WEST CLEARWATER, FL 33761 FEI Number: 59-3656277 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: BENTZ, ROBERT 2872 SÉA PINES CIRCLE WEST CLEARWATER, FL 33761 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete BENTZ, ROBERT L Name: Name: 2872 SEA PINES CR W Address: Address: City-St-Zip: CLEARWATER, FL 337613009 City-St-Zip: Title: () Delete Title: () Change () Addition Name: MILLER, FLOYD Name: Address: 414 MARIVA AVENUE Address: City-St-Zip: CLEARWATER, FL 33755 City-St-Zip: Title: () Delete Title: () Change () Addition SMITH, R M Name: Name: 2197 BRENT PLACE Address: Address: City-St-Zip: PALM HARBOR, FL 34683 City-St-Zip: () Delete Title: Title: (X) Change () Addition Name: EBY, EBY Name: VENKER, CINDY 320 CROSSWINDS DRIVE 1310 FORESTEDGE BLVD. Address: Address: City-St-Zip: PALM HARBOR, FL 34683 City-St-Zip: OLDSMAR, FL 34677

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT L. BENTZ O 04/17/2007