2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

Mar 21, 2005 8:00 am **Secretary of State** DOCUMENT # P00000107793 03-21-2005 90098 024 ***150.00 LADY CANES VOLLEYBALL BOOSTER CLUB, INC. Principal Place of Business Mailing Address 1962 DOWNING PLACE 2421 BUTTERNUT CT. PALM HARBOR FL 34683 **DUNEDIN FL 34698** 2. Principal Place of Business 3. Mailing Address 2421 BUTTERNUT Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) City & State City & State 4. FEI Number Applied For 59-3739157 DUNEDIN Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired PINELLAS 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BOUCHARD, NICOLE Street Address (P.O. Box Number is Not Acceptable) 2421 BUTTERNUT CT. **DUNEDIN FL 34698** Dunedin 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. FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ☐ Delete TITLE Change ☐ Addition BOUCHARS, NICOLE BOUCHARD, NICOLE NAME 2421 BUTTERNUT COURT 1962 DOWNING PLACE STREET ADDRESS STREET ADDRESS PALM HARBOR FL 34683 CITY-ST-7IP CITY-ST-ZIP DUNEDIN TITLE Addition **D**elete TITLE MILLER, PAM COX, SHARON NAME MARAE 414-Mariva Avenue 10 PAPAYA STREET #706 STREET ADDRESS STREET ADDRESS CITY-ST-7IP CLEARWATER BEACH FL 33767 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition SULTENFOSS, SHERRY NAME SULTENPUSS; SHERRY-10 2 HARBOURVIEW LANG STREET ADDRESS 102 HARBOURVIEW LANE STREET ADDRESS CITY-ST-7IP LARGO FL 33770 CITY-ST-ZIP LARGO (PC TIDE TITLE ☐ Change ANN ILES, MARY NAME NAME 5 MITH, KAREN 1010 MICHIGAN AVENUE 759 Trmuguana Lane Palm Harbor, PL 34683 STREET ADDRESS STREET ADDRESS PALM HARBOR FL 34683 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE Change ☐ Addition ILES, MARY ANN NAME 1010 MICHIGAN AVE STREET ADDRESS STREET ADDRESS PALM HARBOR FL 34683 CITY-ST-ZIP CITY-ST-7IP ADPC TITLE TITLE Change ☐ Addition STALZER, JOE NAME STREET ADDRESS | 961 KENT LN. STREET ADDRESS PALM HARBOR FL 34683 CITY-ST-7IP CITY-ST-ZIP 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment address, with all other like empowered.

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Daytime Phone #