2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Mar 10, 2005 8:00 am Secretary of State

DOCUMENT # 726521 1. Entity Name FOREST HIGH SCHOOL BAND BOOSTERS, INC.				. I	03-10-2005 90129 026 ****70.00		
Principal Place 1614 SE FT I OCALA, FL 3	KING ST 4471 US	Mailing Address C/O FOREST HIGH SCHO 1614 SE FT KING ST OCALA, FL 34471 U	OOL US				
	lace of Business		T HIGH SCH				
	SE MARICAMP R		ARICAMP E	24	ng-NP CR2E037 (10/03)		
City & State	ILA, FLORIDA	OCALA, A	CLORIDA	4. FEI Number 59-246357	4 N	oplied For ot Applicable	
3442	30 Country USA	34480	Country USA	5. Certificate of St.	atus Desired \$8.75 Add Fee Require		
	6. Name and Address of Current F	Registered Agent	- Name	7. Name and Add	ress of New Registered Agent		
ALEXANDER, JODY 1614 SE FT. KING STREET OCALA, FL 34471							
OCALA, FE 34471				5000 SE MARICAMP RD.			
e e e e e e e e e e e e e e e e e e e				City OCALA FL Zip Code 480			
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							
	Signature, typed or fulfied name of registered agent a	nd title if applicable. (NOTE	: Registered Agent signature requ	uired when reinstating)	DATE		
Filing Fee is \$61.25 Due by May 1, 2005			9. Election Campaign Financing Trust Fund Contribution.		Make check payable to Florida Department of State		
	Due by may 1, 2005	Trust Fund C	Contribution.	Added to Fees	Florida Department of S	tate	
10.	OFFICERS AND DIR	ECTORS	11.		ES TO OFFICERS AND DIRECTORS IN	l 10	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS	OFFICERS AND DIR PD FULKERSON, MARY 16 PECAN PASS DR	ECTORS	11. TITLE NAME STREET ADDRESS		ES TO OFFICERS AND DIRECTORS IN	l 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND DIR PD FULKERSON, MARY 16 PECAN PASS DR OCALA, FL 34472 VD NEAL, NIKKI 104 SE 19 STREET	ECTORS Delete	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		ES TO OFFICERS AND DIRECTORS IN	I 10 ☐ Addition	
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #