

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000003550

FILED
Apr 30, 2010
Secretary of State

Entity Name: NEWSOME BAND BOOSTERS, INC.

Current Principal Place of Business:

16550 FISHHAWK BLVD.
NEWSOME HIGH SCHOOL
LITHIA, FL 33547

New Principal Place of Business:

16550 FISHHAWK BOULEVARD
LITHIA, FL 33547

Current Mailing Address:

16550 FISHHAWK BLVD.
NEWSOME HIGH SCHOOL
LITHIA, FL 33547

New Mailing Address:

POST OFFICE BOX 286
LITHIA, FL 33547

FEI Number: 65-1314141

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARDNER, JOHN W. ESQ.
221 E. ROBERTSON ST.
BRANDON, FL 33511 US

Name and Address of New Registered Agent:

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:

Title: P
Name: MANALANG, VALERIE
Address: 16550 FISHHAWK BLVD
City-St-Zip: LITHIA, FL 33547

Title: VP
Name: CAREY-STRATTON, PENNY
Address: 16550 FISHHAWK BLVD
City-St-Zip: LITHIA, FL 33547

Title: S
Name: LACKMANN, KRIS
Address: 16550 FISHHAWK BLVD
City-St-Zip: LITHIA, FL 33547

Title: T
Name: ADAMS, SHANNON
Address: 16550 FISHHAWK BLVD
City-St-Zip: LITHIA, FL 33547

Title: D
Name: ROYLE, JALENE
Address: 16550 FISHHAWK BLVD
City-St-Zip: LITHIA, FL 33547

Title: D
Name: FERN, BARB
Address: 16550 FISHHAWK BOULEVARD
City-St-Zip: LITHIA, FL 33547

I hereby 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 all other like empowered.

SIGNATURE: SHANNON ADAMS

T

04/30/2010

Electronic Signature of Signing Officer or Director

Date