

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 20, 2004
Secretary of State**

DOCUMENT# 715770

Entity Name: SEMINOLE HIGH SCHOOL BAND ASSOCIATION, INC.

Current Principal Place of Business:

2701 RIDGEWOOD AVE
SANFORD, FL 327734999

New Principal Place of Business:

Current Mailing Address:

PO BOX 952461
LAKE MARY, FL 327952461

New Mailing Address:

FEI Number: 59-6153333 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEDA, EUGENE
116 OAKLAND AVENUE
SANFORD, FL 32773 US

Name and Address of New Registered Agent:

BRUECK, ESTHER L MRS
155 SPRING ISLE TRAIL
ALTAMONTE SPRINGS, FL 32714 US

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: ESTHER L. BRUECK 01/20/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SEDA, EUGENE
Address: 116 OAKLAND AVE
City-St-Zip: SANFORD, FL 32773

Title: VD () Delete
Name: SEDA, THERESA
Address: 116 OAKLAND AVENUE
City-St-Zip: SANFORD, FL 32773

Title: SD () Delete
Name: GITZKE, ANN
Address: 2901 S PARK AVE
City-St-Zip: SANFORD, FL 32773

Title: TD () Delete
Name: VALENTIN, AILEEN
Address: 306 BEVERLY CT
City-St-Zip: SANFORD, FL 32773

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SCHOTTEN, MICHAEL MR.
Address: 1004 TROUT CREEK COURT
City-St-Zip: OVIEDO, FL 32765 US

Title: VD (X) Change () Addition
Name: GARCIA, ELS MRS.
Address: 190 CHERRYWOOD DRIVE
City-St-Zip: MAITLAND, FL 32751 US

Title: SD (X) Change () Addition
Name: GITZKE, ANN MRS
Address: 2901 S PARK AVE
City-St-Zip: SANFORD, FL 32773 US

Title: TD (X) Change () Addition
Name: BRUECK, ESTHER L MRS.
Address: 155 SPRING ISLE TRAIL
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ESTHER L. BRUECK TD 01/20/2004
Electronic Signature of Signing Officer or Director Date