

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715770

FILED  
Apr 30, 2006  
Secretary of State

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:**

PO BOX 952461  
LAKE MARY, FL 327952461 US

FEI Number: 59-6153333

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BRUECK, ESTHER L MRS  
155 SPRING ISLE TRAIL  
ALTAMONTE SPRINGS, FL 32714 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: PD ( ) Delete  
Name: GALLARDO, MIQUEL MR.  
Address: 347 SPRINGVIEW DRIVE  
City-St-Zip: SANFORD, FL 32773 US

Title: VD ( ) Delete  
Name: SISALEUMSAK, TERRY MRS.  
Address: 418 WEST CRYSTAL DRIVE  
City-St-Zip: SANFORD, FL 32773 US

Title: SD ( ) Delete  
Name: PACE, TERRI MRS  
Address: 453 SUNDOWN TRAIL  
City-St-Zip: CASSELBERRY, FL 32707 US

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

Title: TD ( ) Delete  
Name: DEAN, NICOLE MRS.  
Address: 626 FRUITWOOD AVENUE  
City-St-Zip: WINTER SPRINGS,, FL 32708 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: CORBELL, ANN MRS.  
Address: 364 SPRUCEWOOD CT.  
City-St-Zip: LAKE MARY, FL 32746 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TD (X) Change ( ) Addition  
Name: STALLINGS, LYNN MRS.  
Address: 2701 RIDGEWOOD AVENUE  
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 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: ESTHER L. BRUECK

TD

04/30/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date