

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 715770

**Entity Name:** SEMINOLE HIGH SCHOOL BAND ASSOCIATION, INC.**Current Principal Place of Business:**2701 RIDGEWOOD AVE  
C/O MR. P.L. MALCOLM  
SANFORD, FL 32773-4999**Current Mailing Address:**2701 RIDGEWOOD AVE  
C/O MR. P.L. MALCOLM  
SANFORD, FL 32773-4999**FEI Number:** 59-6153333**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LAFLEUR, MIHAELA VP FINANCE  
2701 RIDGEWOOD AVENUE  
C/O MR. P.L. MALCOLM  
SANFORD, FL 32773 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:** MIHAELA LAFLEUR

01/16/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PRESIDENT
Name	BURKHART, AMANDA
Address	2701 RIDGEWOOD AVE C/O MR. P.L. MALCOLM
City-State-Zip:	SANFORD FL 32773-4999

Title	T
Name	LAFLEUR, MIHAELA
Address	2701 RIDGEWOOD AVE C/O MR. P.L. MALCOLM
City-State-Zip:	SANFORD FL 32773-4999

Title	V PRESIDENT
Name	FLYNN, CHRISTOPHER
Address	2701 RIDGEWOOD AVE C/O MR. P.L. MALCOLM
City-State-Zip:	SANFORD FL 32773-4999

Title	SECRETARY
Name	TOSCANO, CARRIE
Address	2701 RIDGEWOOD AVE C/O MR. P.L. MALCOLM
City-State-Zip:	SANFORD FL 32773-4999

*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:** MIHAELA LAFLEUR

V PRESIDENT

01/16/2022

Electronic Signature of Signing Officer/Director Detail

Date