

**2013 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:**

POLK, JENNIFER TREAS.  
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:** JENNIFER POLK

04/16/2013

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

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

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

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

Title T  
Name PROUDFOOT, CHRISTINE  
Address 2701 RIDGEWOOD AVENUE  
City-State-Zip: SANFORD FL 32773

*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:** JENNIFER POLK

**TREASURER**

04/16/2013

Electronic Signature of Signing Officer/Director Detail

Date