

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755278

Entity Name: TARPON SPRINGS BAND BOOSTERS, INC.**Current Principal Place of Business:**1411 GULF ROAD
TARPON SPRINGS HIGH SCHOOL
TARPON SPRINGS, FL 34689**Current Mailing Address:**P.O. BOX 642
TARPON SPRINGS, FL 34688 US**FEI Number:** 59-2135073**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DUNHAM, PAUL
1411 GULF ROAD
TARPON SPRINGS HIGH SCHOOL
TARPON SPRINGS, FL 34689 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:** PAUL DUNHAM

04/20/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PAST PRESIDENT
Name	BOLLES, DEB
Address	P.O. BOX 642
City-State-Zip:	TARPON SPRINGS FL 34688

Title	TREASURER
Name	STRECKER, BRENDA
Address	P.O. BOX 642
City-State-Zip:	TARPON SPRINGS FL 34688

Title	PRESIDENT
Name	ISENHOOR, TERRI
Address	P.O. BOX 642
City-State-Zip:	TARPON SPRINGS FL 34688

Title	2ND VP
Name	CLIFF, BOB
Address	P.O. BOX 642
City-State-Zip:	TARPON SPRINGS FL 34688

Title	TREASURER
Name	DUNHAM, PAUL
Address	P.O. BOX 642
City-State-Zip:	TARPON SPRINGS FL 34688

Title	CONSERVATORY OPERATIONS DIRECTOR
Name	SHAN, HEATHER
Address	P.O. BOX 642
City-State-Zip:	TARPON SPRINGS FL 34688

Title	MAGNET LIAISON
Name	NAVAS, ELAINE
Address	P.O. BOX 642
City-State-Zip:	TARPON SPRINGS FL 34688

Title	PAST PRESIDENT
Name	ANNIS, JULIE
Address	PO BOX 642
City-State-Zip:	TARPON SPRINGS FL 34688

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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: PAUL DUNHAM

TREASURER

04/20/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title 1ST VP
Name HALULA, MIKE
Address P.O. BOX 642
City-State-Zip: TARPON SPRINGS FL 34688

Title SECRETARY
Name PAYTON, CHRISTY
Address P.O. BOX 642
City-State-Zip: TARPON SPRINGS FL 34688