#### **2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 755278** 

Entity Name: TARPON SPRINGS BAND BOOSTERS, INC.

FILED
Apr 08, 2018
Secretary of State
CC9134995150

# **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:

BURNS, AMY 1313 VERMONT AVE 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: AMY BURNS 04/08/2018

Electronic Signature of Registered Agent Date

#### Officer/Director Detail:

TitlePRESIDENTTitlePRESIDENTNameBOLLES, DEBNameBURNS, AMYAddressP.O. BOX 642AddressP.O. BOX 642

City-State-Zip: TARPON SPRINGS FL 34688 City-State-Zip: TARPON SPRINGS FL 34688

TitleTREASURERTitleTREASURERNameMILARSKY, SEANNameBAKER, JOHNAddressP.O. BOX 642AddressP.O. BOX 642

City-State-Zip: TARPON SPRINGS FL 34688 City-State-Zip: TARPON SPRINGS FL 34688

TitleSECRETARYTitleCO-PRESIDENTNameSHIELDS, CAROLYNNameISENHOUR, TERRIAddressP.O. BOX 642AddressP.O. BOX 642

City-State-Zip: TARPON SPRINGS FL 34688 City-State-Zip: TARPON SPRINGS FL 34688

Title VP Title VP

NameNOSCO, SANDYNameELKS, JASONAddressP.O. BOX 642AddressP.O. BOX 642

City-State-Zip: TARPON SPRINGS FL 34688 City-State-Zip: TARPON SPRINGS FL 34688

#### Continues on page 2

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: JOHN BAKER CO-TREASURER 04/08/2018

# Officer/Director Detail Continued:

Title CO-TREASURER
Name THOMAS, CARTER

Address P.O. BOX 642

City-State-Zip: TARPON SPRINGS FL 34688

Title MAGNET LIAISON
Name NAVAS, ELIANE
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