Entity Name: WESTGLADES MIDDLE	SCHOOL BAND BO	OSTERS, INC.

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

C/O WMS BAND DIRECTOR 11000 HOLMBERG RD PARKLAND, FL 33076

Current Mailing Address:

DOCUMENT# N0300009597

C/O WMS BAND DIRECTOR 11000 HOLMBERG RD PARKLAND, FL 33076 US

FEI Number: 20-0260003

Name and Address of Current Registered Agent:

MEANEY, HEATHER K TREASURER C/O WMS BAND BOOSTERS TREASURER 11000 HOLMBERG RD PARKLAND, FL 33076 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:	HEATHER K	MEANEY

Flectronic	Signature of	f Registered	Agent

Officer/Director Detail ·

Officer/Direc	Officer/Director Detail :				
Title	PRESIDENT	Title	TREASURER		
Name	HUGUS, DANIELLE M	Name	MEANEY, HEATHER K		
Address	C/O WMS BAND DIRECTOR 11000 HOLMBERG RD	Address	C/O WMS BAND DIRECTOR 11000 HOLMBERG RD		
City-State-Zip:	PARKLAND FL 33076	City-State-Zip:	PARKLAND FL 33076		
Title	VP 1 OF VOLUNTEERS	Title	DIRECTOR OF BANDS		
Name	PEERS, CATHERINE	Name	SULLIVAN, GARRETT		
Address	C/O WMS BAND DIRECTOR 11000 HOLMBERG RD	Address	C/O WMS BAND DIRECTOR 11000 HOLMBERG RD		
City-State-Zip:	PARKLAND FL 33076	City-State-Zip:	PARKLAND FL 33076		
Title	SECRETARY	Title	VP 2 OF FUNDRAISING		
Name	ARMSTRONG, NAVIA	Name	GAGNE, SUZIE		
Address	C/O WMS BAND DIRECTOR 11000 HOLMBERG RD	Address	C/O WMS BAND DIRECTOR 11000 HOLMBERG RD		
City-State-Zip:	PARKLAND FL 33076	City-State-Zip:	PARKLAND FL 33076		

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.

TREASURER

SIGNATURE: HEATHER MEANEY

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

03/20/2024 Date

03/20/2024 Date