

2017 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N13000007963

Entity Name: RAINES BAND BOOSTERS, INCORPORATED

Current Principal Place of Business:

3663 RAINES AVENUE
C/O BAND BOOSTERS
JACKSONVILLE, FL 32209

Current Mailing Address:

3663 RAINES AVENUE
C/O BAND BOOSTERS
JACKSONVILLE, FL 32209 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BRINSON, JOI K
3183 HIDDEN MEADOWS CT.
GREEN COVE SPRINGS, FL 32043 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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRES
Name SOLOMON, SARITA
Address 342 E. 9TH STREET
City-State-Zip: JACKSONVILLE FL 32206

Title TREA
Name MCWHITE, MELANIE
Address 1551 CRICHTON ROAD W
City-State-Zip: JACKSONVILLE FL 32221

Title VP
Name MCWHITE, CHARLES
Address 1551 CRICHTON ROAD W
City-State-Zip: JACKSONVILLE FL 32221

Title SECRETARY
Name WARREN, TAMMARRA
Address 6840 VAN GUNDY RD
City-State-Zip: JACKSONVILLE FL 32208

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: SARITA SOLOMON

PRESIDENT

07/21/2017

Electronic Signature of Signing Officer/Director Detail

Date