

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709186

FILED
Jan 24, 2005
Secretary of State

Entity Name: LAKE WALES SCHOOL BAND ASSOCIATION, INC.

Current Principal Place of Business:

1 HIGHLANDER WAY
LAKE WALES, FL 33853

New Principal Place of Business:

Current Mailing Address:

P O BOX 1195
LAKE WALES, FL 338591195 US

New Mailing Address:

FEI Number: 59-6161525

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KREGL, MARY B
825 HICKORY HAMMOCK RD
LAKE WALES, FL 33859 US

Name and Address of New Registered Agent:

WEIKERT, ROBERT E
21399 HWY 27
LAKE WALES, FL 33859 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: ROBERT E WEIKERT

01/24/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SWEENEY, GAIL
Address: 1060 CAMPBELL AVE.
City-St-Zip: LAKE WALES, FL 33853

Title: PD () Delete
Name: HOOK, KIM VAN
Address: 807 CAMPBELL AVENUE
City-St-Zip: LAKE WALES, FL 33853

Title: D () Delete
Name: FARRER, PEGGY
Address: 9421 RED OAK COURT
City-St-Zip: LAKE WALES, FL 33898

Title: SD () Delete
Name: QUANN, GAIL
Address: 710 CARLTON AVE.
City-St-Zip: LAKE WALES, FL 33853

Title: TD () Delete
Name: KREGL, MARY B
Address: 825 HICKORY HAMMOCK RD
City-St-Zip: LAKE WALES, FL 33859

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: WEIKERT, ROBERT E
Address: 21399 HWY 27
City-St-Zip: LAKE WALES, FL 33859

Title: VP (X) Change () Addition
Name: WHANN, PENNY
Address: 1100 DOGWOOD LANE
City-St-Zip: LAKE WALES, FL 33898

Title: SD (X) Change () Addition
Name: ALLEN, KARLA
Address: 7731 KIMBREL ROAD
City-St-Zip: LAKE WALES, FL 33853

Title: TD (X) Change () Addition
Name: MCCOY, LOU ANN
Address: 340 JEFFERSON ST
City-St-Zip: LAKE WALES, FL 33859

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROBERT E WEIKERT

PRES

01/24/2005

Electronic Signature of Signing Officer or Director

Date