

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709186

FILED
Apr 22, 2009
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:

PUGH, MELODIE T
739 OSCEOLA AVE
LAKE WALES, FL 33853 US

Name and Address of New Registered Agent:

SIMS, GWEN
2317 MAMMOTH GR. RD.
LAKE WALES, FL 33898 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: GWEN SIMS

04/22/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BALLIETT, ARTHUR
Address: 2670 PANTHEE PASS
City-St-Zip: LAKE WALES, FL 33898

Title: V () Delete
Name: CARANI, JOSEPH
Address: 6253 AMARYLLIS DRIVE
City-St-Zip: INDIAN LAKE ESTATES, FL 33855

Title: S () Delete
Name: MCKENNA, MELODY
Address: 3604 RED OAK COURT
City-St-Zip: LAKE WALES, FL 33898

Title: T () Delete
Name: PUGH, MELODIE
Address: 739 OSCEOLA AVE
City-St-Zip: LAKE WALES, FL 33853

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ARTHUR, DOROTHY
Address: 2136 BOUYER ST.
City-St-Zip: LAKE WALES, FL 33898

Title: V (X) Change () Addition
Name: EDENFIELD, VICTORIA
Address: 521 NORTH 5TH ST. APT# 4
City-St-Zip: LAKE WALES, FL 33853

Title: S (X) Change () Addition
Name: FUTLER, LISA
Address: 464 RIDGE MANOR DRIVE
City-St-Zip: LAKE WALES, FL 33853

Title: T (X) Change () Addition
Name: SIMS, GWEN
Address: 2317 MAMMOTH GR. RD,
City-St-Zip: LAKE WALES, FL 33898

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: GWEN SIMS

T

04/22/2009

Electronic Signature of Signing Officer or Director

Date