

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 709186

**FILED**  
**Apr 29, 2012**  
**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:**

BYRD, STACY  
2342 CAPPs RD  
LAKE WALES, FL 33853 US

**Name and Address of New Registered Agent:**

SPANGLER, LYNNE  
3700 BLACK JACK CT  
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: LYNNE SPANGLER

04/29/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BLACKWELDER, MARK  
Address: 3357 BAHAMA CT  
City-St-Zip: LAKE WALES, FL 33898

Title: V  
Name: BLAIR, CHENITA  
Address: 424 RAINBOW BLVD  
City-St-Zip: BABSON PARK, FL 33853

Title: S  
Name: BYRD, STACY  
Address: 2342 CAPPs RD  
City-St-Zip: LAKE WALES, FL 33898

Title: T  
Name: SPANGLER, LYNNE  
Address: 3700 BLACK JACK CT  
City-St-Zip: LAKE WALES, FL 33898

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: LYNNE SPANGLER

T

04/29/2012

Electronic Signature of Signing Officer or Director

Date