

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 710225 (4)
1. Corporation Name

NORTHEAST HIGH SCHOOL BAND BOOSTERS, INCORPORATED

Principal Place of Business

1715 54th Avenue North
St. Petersburg, FL 33714
US

Mailing Address

640 46th Avenue North
St. Petersburg, FL 33703-3808
US

3. Date Incorporated or Qualified

01/19/1966

3a. Date of Last Report

04/18/95

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number

59-285-1258

Applied For

Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired

☒ X

\$8.75 Additional
Fee Required

23 Zip

Country

28 Zip

Country

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

24

25

29

30

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SALLIOTTE, PHYLLIS
7549 16TH Street North
St. Petersburg, FL 33702

81 Name
WELSH, Grey

82 Street Address (P.O. Box Number is Not Acceptable)
640 46th Avenue North

83

84 City
St. Petersburg

FL

85 Zip Code
33703-3808

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Grey Welsh

(NOTE: Registered Agent signature required when reinstating)

July 22, 1996

12. OFFICERS AND DIRECTORS

TITLE P/D ☐ DELETE
NAME ALCOTT, Sandy
STREET ADDRESS 6700 22nd Street North
CITY - ST - ZIP St. Petersburg, FL 33702

TITLE S/D ☐ DELETE
NAME WELSH, Charles
STREET ADDRESS 640 46th Avenue North
CITY - ST - ZIP St. Petersburg, FL 33703-3808

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE V/D ☐ Change ☒ Addition
1.2 NAME KARNEGIE, Tammy
1.3 STREET ADDRESS 478 74th Avenue North
1.4 CITY - ST - ZIP St. Petersburg, FL 33702

2.1 TITLE T/D ☐ Change ☒ Addition
2.2 NAME WELSH, Grey
2.3 STREET ADDRESS 640 46th Avenue North
2.4 CITY - ST - ZIP St. Petersburg, FL 33703-3808

3.1 TITLE S/D ☐ Change ☒ Addition
3.2 NAME STANTON, Denise
3.3 STREET ADDRESS 6322 Bayou Grande Boulevard Northeast
3.4 CITY - ST - ZIP St. Petersburg, FL 33702

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Sandy Alcott

Sandy Alcott

July 15, 1996 (813) 522-4412

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (3/96)