2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#710225

FILED Jun 13, 2009 Secretary of State

Entity Name: NORTHEAST HIGH SCHOOL BAND BOOSTERS, INCORPORATED

Current Principal Place of Business: New Principal Place of Business: 5500 16 STREET NORTH ST PETERSBURG, FL 33703 US **Current Mailing Address: New Mailing Address:** 5500 16 STREET NORTH ST PETERSBURG, FL 33703 FEI Number: 41-2270120 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DEGRAW, KELLI A NORTHEAST HIGH SCHOOL BAND BOOSTERS 5500 16 STREET NORTH ST PETERSBURG, FL 33703 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BATCHELLER, VICTORIA C Name: Name: 5283 46TH AVENUE NORTH Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33709 City-St-Zip: Title: () Delete Title: VPD (X) Change () Addition POPLOWSKI, TERRI L Name: STARBIRD, SUMNER Name: Address: 4531 52ND AVENUE NORTH Address: 4850 TAYLOR STREET NO City-St-Zip: SAINT PETERSBURG, FL 33714 City-St-Zip: SAINT PETERSBURG, FL 33714 Title: () Delete Title: () Change () Addition DEGRAW, KELLI A Name: Name: 5619 COMMONWEALTH AVE Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33703 City-St-Zip: Title: TD () Delete Title: () Change () Addition Name: WEBORG, SUSAN R Name: 536 89TH AVENUE NO Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33702 City-St-Zip: Title: () Delete Title: SD (X) Change () Addition VANDERBLEEK, CATHY Name: Name: WITKO, MYRA 6100 16TH LANE NE 6730-1 CAPE HATTERAS WAY NE Address: Address: SAINT PETERSBURG, FL 33703 SAINT PETERSBURG, FL 33702 City-St-Zip: City-St-Zip:

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: KELLI A. DEGRAW TD 06/13/2009