

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712314

FILED
Jan 17, 2006
Secretary of State

Entity Name: SEABREEZE BAND PARENT'S ASSOCIATION, INC.

Current Principal Place of Business:

SEABREEZE HIGH SCHOOL
2700 N. OLEANDER AVE.
DAYTONA BEACH, FL 32118

New Principal Place of Business:

Current Mailing Address:

SEABREEZE HIGH SCHOOL
2700 N. OLEANDER AVE.
DAYTONA BEACH, FL 32118

New Mailing Address:

FEI Number: 59-6606898

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PUTTING, JOE
147 CHEROKEE DRIVE
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

MYERS, MIKE
1702 BUENA VISTA AVE.
HOLLY HILL, FL 32117 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: MIKE MYERS

01/17/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PUTTING, JOE
Address: 147 CHEROKEE DRIVE
City-St-Zip: ORMOND BCH, FL 32174

Title: VD () Delete
Name: MYERS, MIKE
Address: 1702 BUENA VISTA AVENUE
City-St-Zip: HOLLY HILL, FL 32117

Title: TD () Delete
Name: HUGHES, LAURA
Address: 950 HOLLY CIRCLE
City-St-Zip: ORMOND BEACH, FL 32176

Title: SD () Delete
Name: BRINN, PAMELA
Address: 3 TOMOKA VIEW DRIVE
City-St-Zip: ORMOND BEACH, FL 32174

Title: D () Delete
Name: EVANS, ELEANOR S
Address: 150 HARTFORD AVE
City-St-Zip: DAYTONA BEACH, FL 32118

Title: D () Delete
Name: SCACCIA, DENNIS
Address: 2700 N. OLEANDER AVE
City-St-Zip: DAYTONA BEACH, FL 32118

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MYERS, MIKE
Address: 1702 BUENA VISTA AVE.
City-St-Zip: HOLLY HILL, FL 32117

Title: VD (X) Change () Addition
Name: WILSON, YVONNE
Address: 748 S. RIDGEWOOD AVE.
City-St-Zip: ORMOND BEACH, FL 32174

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

Title: SD (X) Change () Addition
Name: FRENCH, NANCY
Address: 764 CANDLEWOOD CIRCLE
City-St-Zip: ORMOND BEACH, FL 32174

Title: D (X) Change () Addition
Name: RICE, NANCY
Address: 952 PARKWOOD DRIVE
City-St-Zip: ORMOND BEACH, FL 32174

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

I hereby certify that the information supplied with this filing does not qualify for the 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: LAURA HUGHES

TD

01/17/2006

Electronic Signature of Signing Officer or Director

Date