

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715806

FILED
Feb 04, 2008
Secretary of State

Entity Name: MCARTHUR BAND BOOSTERS, INC.

Current Principal Place of Business:

6501 HOLLYWOOD BLVD.
HOLLYWOOD, FL 330247647 US

New Principal Place of Business:

Current Mailing Address:

6501 HOLLYWOOD BLVD.
HOLLYWOOD, FL 330247647 US

New Mailing Address:

FEI Number: 65-0204701

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SECREST, ROBIN
7533 MCKINLEY ST
HOLLYWOOD, FL 33024 US

Name and Address of New Registered Agent:

SECREST, ROBIN TREASUR
7533 MCKINLEY ST
HOLLYWOOD, FL 33024 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: ROBIN SECREST

02/04/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: SECREST, ROBIN
Address: 7533 MCKINLEY ST
City-St-Zip: HOLLYWOOD, FL 33024 US

Title: PD () Delete
Name: SZWANKE, JOSEPH
Address: 1881 NW 84 AVE
City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: VD () Delete
Name: DESSI, PIA
Address: 7020 SW 12 ST
City-St-Zip: PEMBROKE PINES, FL 33023 US

Title: VD () Delete
Name: ORTIZ, CATHRINE
Address: 6941 SW 9 ST
City-St-Zip: PEMBROKE PINES, FL 33023 US

Title: S () Delete
Name: NATH, DEBBIE
Address: 1951 NW 86 TERR
City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: S () Delete
Name: SANTIAGO, SARAH
Address: 8520 NW 23 ST
City-St-Zip: PEMBROKE PINES, FL 33024 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: () Change () Addition
Name:
Address:
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: JOSEPH SZWANKE

PD

02/04/2008

Electronic Signature of Signing Officer or Director

Date