

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006 8:00 am
Secretary of State

04-27-2006 90172 001 ****70.00

DOCUMENT # 722369

1. Entity Name
BUCHHOLZ BAND BOOSTERS, INC.



Principal Place of Business
**5510 N.W. 27TH AVE.
GAINESVILLE, FL 32606-6405**

Mailing Address
**5510 N.W. 27TH AVE.
GAINESVILLE, FL 32606-6405**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04192006 Chg-NP CR2E037 (11/05)

4. FEI Number
59-0217165

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**THORNTON, PAULA
5510 NW 27 AVE
GAINESVILLE, FL 32606**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **P** ☒ Delete
NAME **FRANKLIN, CURTIS F JR**
STREET ADDRESS **1713 NW 71ST ST**
CITY-ST-ZIP **GAINESVILLE, FL 32605**

TITLE **VP** ☒ Delete
NAME **LIND, BARBARA**
STREET ADDRESS **8007 SW 43RD PL**
CITY-ST-ZIP **GAINESVILLE, FL 32608**

TITLE **SD** ☐ Delete
NAME **PARHAM, LESLIE**
STREET ADDRESS **2105 NW 36TH DR.**
CITY-ST-ZIP **GAINESVILLE, FL 32605**

TITLE **T** ☒ Delete
NAME **GILLETTE, PHYLLIS**
STREET ADDRESS **6313 NW 93RD TERR.**
CITY-ST-ZIP **GAINESVILLE, FL 32653**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☒ Change ☐ Addition
NAME **DAVID LOONEY**
STREET ADDRESS **1908 SW 80TH DRIVE**
CITY-ST-ZIP **GAINESVILLE FL 32611**

TITLE **VPD** ☒ Change ☐ Addition
NAME **TRACY RAMBO**
STREET ADDRESS **2315 NW 38TH DRIVE**
CITY-ST-ZIP **GAINESVILLE FL 32605**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **TD** ☒ Change ☐ Addition
NAME **HANSFORD TYLER**
STREET ADDRESS **5675 SW 88 CT**
CITY-ST-ZIP **GAINESVILLE FL 32608**

TITLE **VPD** ☐ Change ☒ Addition
NAME **DEBRA OBERLIN**
STREET ADDRESS **2324 NW 66TH TERRACE**
CITY-ST-ZIP **GAINESVILLE FL 32606**

TITLE **VPD** ☐ Change ☒ Addition
NAME **GINNY MCLEOD**
STREET ADDRESS **5535 SW 93RD WAY**
CITY-ST-ZIP **GAINESVILLE FL 32608**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Hansford Tyler* **HANSFORD TYLER**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/06 352-273-5002

Date

Daytime Phone #