## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#722369** 

Entity Name: BUCHHOLZ BAND BOOSTERS, INC.

FILED Apr 25, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5510 N.W. 27TH AVE. GAINESVILLE, FL 326066405

Current Mailing Address: New Mailing Address:

5510 N.W. 27TH AVE. GAINESVILLE, FL 326066405

FEI Number: 59-3077713 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

THORNTON, PAULA KAMINSKY, ALEXANDER 5510 NW 27 AVE 5510 NW 27 AVE

GAINESVILLE, FL 32606 US GAINESVILLE, FL 32606 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: ALEXANDER KAMINSKY 04/25/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition Name: LOONEY, DAVID Name: LOONEY, DAVID

Address: 5510 NW 27TH AVE. Address: 1908 SW 80TH DRIVE
City-St-Zip: TAMPA, FL 336066405 City-St-Zip: GAINESVILLE, FL 32607

Title: VP ( ) Delete Title: VPF (X) Change ( ) Addition Name: BROWN, KATHY Name: BEVERUNG, SUSAN

 Address:
 5510 NW 27TH AVE.
 Address:
 13621 4TH LANE

 City-St-Zip:
 GAINESVILLE, FL 32606
 City-St-Zip:
 NEWBERRY, FL 32669

Name: BENSON, NIEL Name: BENSON, NEAL

 Address:
 5510 NW 27 AVE
 Address:
 6225 NW 52ND TERRACE

 City-St-Zip:
 GAINESVILLE, FL 32606
 City-St-Zip:
 GAINESVILLE, FL 32653

Title: TD ( ) Delete Title: TD (X) Change ( ) Addition

 Name:
 POLLARD, NANCY
 Name:
 POLLARD, NANCY

 Address:
 5510 NW 27 AVE
 Address:
 4511 NW 20TH PL

 City-St-Zip:
 GAINESVILLE, FL 32605
 City-St-Zip:
 GAINESVILLE, FL 32605

 Name:
 PARHAM, LESLIE
 Name:
 PARHAM, LESLIE

 Address:
 5510 NW 27 AVE
 Address:
 2105 NW 36TH DRIVE

 City-St-Zip:
 GAINESVILLE, FL 32606
 City-St-Zip:
 GAINESVILLE, FL 32605

Title: ( ) Delete Title: VPSP ( ) Change (X) Addition

 Name:
 Name:
 GLOVER, COLLEEN

 Address:
 Address:
 5026 NW 36TH DRIVE

 City-St-Zip:
 City-St-Zip:
 GAINESVILLE, FL 32605

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: NEAL BENSON T 04/25/2009