2001 UNIFORM BUSINESS REPORT (UBR)

FILED Jul 31, 2001 8:00 am **DOCUMENT # 728738 Secretary of State** 1. Entity Name 07-31-2001 90241 009 ****70.00 TEAGUE MIDDLE SCHOOL BAND BOOSTERS, INC. Mailing Address Principal Place of Business 1350 MCNEIL RD 1350 MCNEIL RD UUU6U142 ALTAMONTE SPRINGS FL 32714 ALTAMONTE SPRINGS FL 32714 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. *59-370590*9 Applied For City & State City & State 4. FEI Number 59 2099503 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name_ - 12 mg/ Street Address (P.O. Box Number is Not Acceptable) 'tobin, andrea l 1350 MCNEIL RD **ALTAMONTE SPRINGS FL 32714** Zip Code City 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. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing Make Check Payable to FILE NOW: FEE IS \$61.25 \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State After September 12, 2001, min. will be \$236.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. Change PD ☐ Addition TITI F Delete TITLE NEUKAMM, KAREN RATAY, WILLIAM J NAME NAME 662 Bak HOLLOW WAY STREET ADDRESS STREET ADDRESS 1357 HOLLY GLEN RUN 32714 ALTAMOUTE SPRINGS, FL CITY-ST-7IP CITY-ST-ZIP APOPKA FL 32703 ☐ Change ☐ Addition TITLE ☐ Delete TITLE BECKMAN, JANET L NAME STREET ADDRESS STREET ADDRESS 2211 S TERRACE BLVD CITY-ST-ZIP CITY-ST-ZIP LONGWOOD FL 32779 (XChange ☐ Addition -Delete 🛫 _ TITLE MENDEZ, LYAN Brewer, Susan O NAME NAME 445 WEKIVA COVE ROAD 117 FORREST PARK CT STREET ADDRESS STREET ADDRESS LONGWOOD, FL 32779 CITY-ST-ZIP LONGWOOD FL 32779 CITY-ST-ZIP Change ☐ Addition Delete SD TITI F TITLE DALLES, JUDITH 257 COBLE DRIVE SARAS, MARY JO NAME NAME STREET ADDRESS 287 BENTLEY DR STREET ADDRESS CITY-ST-ZIP LUNGWOUD, FL CITY-ST-ZIP LONGWOOD FL 32779 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

CITY-ST-ZIP

CITY-ST-ZIP

IROQUET L. Bockman 7/25/01