

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra D. Morham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 6:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 731503 (9)

1. Corporation Name

DEERFIELD BEACH HIGH SCHOOL BAND PARENTS ASSOCIATION, INC.

400001484764

-05/12/95--01003--006

DO NOT WRITE IN THESE SPACES

Principal Place of Business

Mailing Address

910 SW 15TH ST.
PO BOX 972
DEERFIELD BCH FL 33441
US

910 S.W. 15TH STREET
P. O. BOX 972
DEERFIELD BEACH FL 33441

3. Date Incorporated or Qualified

12/30/1974

3a. Date of Last Report

05/12/1994

4. FEI Number

59-1793437

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)

☒

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MACKAY, JANET
5061 NE 14TH TERRACE
POMPANO BEACH FL 33441

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reconstituting)

4-30-95

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

P

MACKAY, JANET
5061 NE 14TH TERRACE
POMPANO BEACH FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

VD

WARREN, JANET
2432 NE 12TH TERRACE
POMPANO BEACH FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TD

PALMER, JANET
1350 SE THIRD TERRACE
DEERFIELD BEACH FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

VD

BIERWIRTH, SANDRA
1321 NE 26TH CT
POMPANO BEACH FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D

HERNET, CAROL
3310 NE 26TH AVENUE
LIGHTHOUSE PT. FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

SD

HORAN, CECELIA
1301 SE THIRD AVENUE
DEERFIELD BEACH FL

13. TITLE

11 NAME

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

☐ Change ☐ Addition

Same

☒ Change ☐ Addition

VD
Horan, Cecelia
1301 S.E. Third Ave
Deerfield Beach, FL

☐ Change ☐ Addition

Same

☐ Change ☒ Addition

VD
Roy, Bonnie
833 S.E. 4th Court #18
Deerfield Beach, FL

☐ Change ☐ Addition

Same

☐ Change ☒ Addition

SD
Dillevig, Patricia
319 S.W. 34th Ave.
Deerfield Beach, FL

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Janet Palmer

Janet Palmer

4-30-95

480-9543

SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR

Title

Telephone #