


# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

08-09-2004 90012 049 \*\*\*297.50  
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<b>DOCUMENT # 731503</b>	
1. Entity Name <b>DEERFIELD BEACH HIGH SCHOOL BAND PARENTS ASSOCIATION, INC.</b>	

FILED

04 AUG 17 PM 1:44

Principal Place of Business <b>DEERFIELD BEACH HIGH SCHOOL 910 SW 15TH ST. DEERFIELD BCH FL 33441 US</b>	Mailing Address <b>DEERFIELD BEACH HIGH SCHOOL 910 SW 15TH ST. DEERFIELD BCH FL 33441 US</b>
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

03-09



MOORE CR2E037 (4/04)

2. Principal Place of Business <b>410 S.E. 2nd Avenue</b>	3. Mailing Address <b>Apt. A-1</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State <b>Deerfield Beach, FL</b>	City & State <b>Deerfield Beach, FL</b>
Zip <b>33441</b>	Country <b>Broward</b>

4. FEI Number <b>59-1793437</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent <b>AGTEY, ANJALI G 4131 NW 41ST DRIVE COCONUT CREEK FL 33073</b>	
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7. Name and Address of New Registered Agent Name <b>Susan Hoyt</b> Street Address (P.O. Box Number is Not Acceptable) <b>410 S.E. 2nd Avenue, Apt A-1 Deerfield Beach, FL 33441</b>	
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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 <b>Susan Hoyt</b> <b>Susan Hoyt, Treasurer 8/1/04</b> <small>Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required for reinstating)</small>	
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<b>FILE NOW: FEE IS \$61.25 Due By September 8, 2004</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>-\$5.00 May Be Added to Fees</b>	<b>Make Check Payable to Florida Department of State</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LAVOIE, ROSEMARIE 1109 SE 7TH COURT DEERFIELD BEACH FL 33441 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Charlene Hannah 1400 W.W. 33rd Street, Lot 36 Pompano Beach, FL 33064 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MCMAHON, DIANE 2070 NW 38 AVENUE COCONUT CREEK FL 33066 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Viola Graham 211 NE 43rd Street Pompano Beach, FL 33064 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD AGTEY, ANGIE 4131 NW 41 DRIVE COCONUT CREEK FL 33073 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Susan Hoyt 410 S.E. 2nd Avenue, Apt A-1 Deerfield Beach, FL 33441 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD KOLCZ, EDWARD 278 NW 43RD WAY DEERFIELD BEACH, FL 33442 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Vonda Carson 9023 W.W. 38th Street Coral Springs, FL <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.	
SIGNATURE: <b>Susan L. Hoyt</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	Date <b>8/1/04</b> Daytime Phone # <b>561 477-9000</b>