

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 732158

FILED
Oct 28, 2004
Secretary of State**Entity Name:** FROSTPROOF BAND BOOSTERS, INC.**Current Principal Place of Business:**1000 PALM AVENUE
PO BOX #172
FROSTPROOF, FL 33843 US**New Principal Place of Business:****Current Mailing Address:**P.O BOX 172
FROSTPROOF, FL 33843 US**New Mailing Address:****FEI Number:** 59-6594503 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ALIA, STEPHEN
2282 FIRESTONE PLACE
WINTER HAVEN, FL 33884 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PD () Delete
Name: ROCK, LISA
Address: 140 JACKSON STREET
City-St-Zip: LAKE WALES, FL 33859**Title:** TD () Delete
Name: MAXWELL, BEVERLY
Address: 2650 N LAKE REEDY BLVD
City-St-Zip: FROSTPROOF, FL 33843**Title:** D () Delete
Name: MANN, JANICE T
Address: 1000 WALD LOOP RD
City-St-Zip: BABSON PARK, FL 33827**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** D (X) Change () Addition
Name: SHELTON, DENISE
Address: 147 MARTHA DRIVE
City-St-Zip: LAKE WALES, FL 33859

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BEVERLY MAXWELL

TD

10/28/2004

Electronic Signature of Signing Officer or Director

Date