

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734624

FILED
Apr 24, 2009
Secretary of State

Entity Name: AVON PARK BAND PARENTS AND BOOSTER ASSOCIATION, INC.

Current Principal Place of Business:

700 EAST MAIN STREET
AVON PARK, FL 33825

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 722
AVON PARK, FL 33826

New Mailing Address:

FEI Number: 59-6171071

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DONALDSON, DEVON P
120 SOUTH ANOKA AVENUE
AVON PARK, FL 33825 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: WILLIS, JOSEPH
Address: 25 WEST LAGRANDE STREET
City-St-Zip: AVON PARK, FL 33825

Title: VD () Delete
Name: GERGEN, JONI
Address: 1300 E OAK RUN
City-St-Zip: AVON PARK, FL 33825

Title: TD () Delete
Name: WILLIS, JENNIFER
Address: 25 WEST LAGRANDE STREET
City-St-Zip: AVON PARK, FL 33825

Title: S () Delete
Name: ZACHARY, NANCY
Address: 1800 TR FONDA ROAD
City-St-Zip: AVON PARK, FL 33825

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOSEPH WILLIS

PD

04/24/2009

Electronic Signature of Signing Officer or Director

Date