2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Sep 20, 2005 **DOCUMENT# 737107** Secretary of State

Entity Name: FORT MEADE BAND BOOSTERS, INC.

Current Principal Place of Business: New Principal Place of Business:

700 N.EDGEWOOD DRIVE FORT MEADE, FL 33841

Current Mailing Address: New Mailing Address:

700 N.EDGEWOOD DRIVE FORT MEADE, FL 33841

FEI Number: 58-3025833 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SELPH, PATRICIA 2365 HWY. 98 EAST FORT MEADE, FL 33841 US

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

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition SELPH, PATRICIA SELPH, PATRICIA Name: Name:

2365 HWY. 98 EAST Address: 2365 HWY. 98 EAST Address: FORT MEADE, FL 33841 City-St-Zip: City-St-Zip: FORT MEADE, FL 33841

Title: () Delete Title: (X) Change () Addition GARCIA, BEATRIZ Name: MOSLEY, TANYA Name: Address: 2355 HWY. 98 EAST Address: 1706 MT, PISGAH RD.

City-St-Zip: FORT MEADE, FL 33841 City-St-Zip: FORT MEADE, FL 33841

Title: () Delete Title: (X) Change () Addition LEVINS, JAMES FIELDS, BOBBIE Name: Name:

5860 LAKE BUFFIN RD. SOUTH Address: Address: 705 DIXON STREET City-St-Zip: FORT MEADE, FL 33841 City-St-Zip: FORT MEADE, FL 33841

Title: () Delete Title: C.S. (X) Change () Addition Name: TAYLOR, VAL Name: LEVINS, JAMES 2533 GABRIEL RD. Address:

Address: 5860 LAKE BUFFUN RD. SOUTH City-St-Zip: FT MEADE, FL 33841 City-St-Zip: FT MEADE, FL 33841

Title:

Title: () Delete (X) Change () Addition GARCIA, JESUS PATTERSON, TAMMY Name: Name: 2355 HWY 98 E 809 NE 6TH STREET Address: Address:

City-St-Zip: FORT MEADE, FL 33541 City-St-Zip: FORT MEADE, FL 33541 Title: () Delete Title: (X) Change () Addition

PATTERSON, TAMMY DUNKIN, DANNY Name: Name: Address: 809 NE 6TH ST. Address: 923 EAST BROADWAY APT. 22 FORT MEADE, FL 33841 FORT MEADE, FL 33841 City-St-Zip: City-St-Zip:

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: PATRICIA SELPH P/S 09/20/2005