

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742729

FILED
Jan 28, 2005
Secretary of State

Entity Name: PENSACOLA HIGH SCHOOL BAND BOOSTERS ASSOCIATION , INC.

Current Principal Place of Business:

PENSACOLA HIGH SCHOOL
500 WEST MAXWELL STREET
PENSACOLA, FL 32501

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 17101
PENSACOLA, FL 32522

New Mailing Address:

FEI Number: 59-1820692

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YORK, BRIAN
3350 BLUEWATER DR
PENSACOLA, FL 32503 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: ALLENDER, GREG
Address: 723 CRICKET CIRCLE
City-St-Zip: PENSACOLA, FL 32533

Title: VP () Delete
Name: NIXON, CHRISTINE
Address: 9196 STILLBRIDGE LANE
City-St-Zip: PENSACOLA, FL 32514

Title: T () Delete
Name: EASTERLIN, MARK
Address: 1711 BEACHSIDE DR
City-St-Zip: PENSACOLA, FL 32506

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NIXON, CHRISTINE
Address: 9196 STILLBRIDGE LANE
City-St-Zip: PENSACOLA, FL 32514

Title: VP (X) Change () Addition
Name: WHITE, ROSE
Address: PO BOX 37032
City-St-Zip: PENSACOLA, FL 32526

Title: () Change () Addition
Name:
Address:
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: MARK M. EASTERLIN

T

01/28/2005

Electronic Signature of Signing Officer or Director

Date