PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

				<b>5</b> √1 <i>i</i> .					
	RPORATION STATEMENT		Secre	ARTMENT OF STATE OF CORPORATIONS	TE		7   11   12: 2		
DOCUMENT # 745808									
LEHIGH CONCERT BAND INC.						·			
2. Principal Office Address , 3. Mailing Office Address									
Carrier II Di			5. Mailing Office Ad	SAME		CR2E081 (12/05)			
Suite, Apt. #, etc.			Suite, Apt. #, etc.			4. Date Incorporated or Qualified To Do Business in Florida 7 57 - 79			
City & State LEHIGH ACRES FL.			City & State			5. FEI Number Applied For			
Zip	Country		Zip	Country	6.	- 187995. TE OF STATUS DESIREI	\$8.75 Addi	Not Applicable	
339	36 US	Н				E OF STATUS DESIRED	for a Cer	tificate of Status	
	Name Reyvolds A. Brinton Ja. (oFFices 02/06-01004-009 ***81.25								
	Street Address (P.O. Box Number is Not Acceptable)  80 1 11 LEELBND HOTS BLUD								
	Suite, Apt. #, Etc.							_	
	CityLEHIG	H Ae	res		05/	92 <b>76</b> - 349	35521 436 <sup>010</sup>	<b>98</b> **81.25	
8. 1, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.									
Signature of Registered Agent Date 3-8-06  REGISTERED AGENT MUST SIGN									
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)									
Titles		Name of and/or Directors		Street Address of Officer and/or D			City / State / Zip		
P	A.B REY	WOLDS	JR 116	So. RICH MOD	DA.	LEHIGHI	ACRES!	-133936	
VP.	Willow	HOSTE	TLER 30	4 LAKE A	o. N	LEHICH	ACRES +	233972	
TD	KENNETA	+ FOCE	ETTE 317	7 EDWARDS	Au,	LEAGEN A	CRESFL	33972	
	D /1/19/10/								
	DE SENT OC V								
	a area a para a constant a consta								
10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filling this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.									
SIGNATURE: OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Dayling Phone #									

payont

## Lehigh Concert Band, Inc. 801 W. Leeland Hgts. Blvd. Lehigh Acres, Fl 33936 Tel: (239) 369-5182 Fax: (239) 369-9703

April 13, 2006

5 . . a ="

Florida Department of State P.O. Box 6327 Tallahassee, Fl 32314

Subject:

Lehigh Concert Band, Inc.

Ref. #745008

Non Filing of annual reports 2005/2006

## Gentlemen:

This letter is in response to your letter of March 22, 2006, (enclosed).

After canvassing all members, who would possibly have received the notice of annual report in 2005, no one indicated they had received the notice, therefore I believe we did not receive the notice of payment due.

Thus, I am returning two (2) checks each for 61.25 to cover 2005 and 2006 along with your letter of March 22, 2006 and our assurance that the notice was not received by anyone in the organization.

Therefore, by returning all necessary documents and checks, we pray the State will accept our apologies and process our fees.

Thank you,

A.B. Reynolds, Jr

President