

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752131

FILED
Apr 20, 2009
Secretary of State

Entity Name: LAKELAND HIGHLANDS JUNIOR HIGH SCHOOL BAND PARENT'S ASSOCIATION, INC.

Current Principal Place of Business:

740 LAKE MIRIAM DRIVE
LAKELAND, FL 338132151

New Principal Place of Business:

Current Mailing Address:

740 LAKE MIRIAM DRIVE
LAKELAND, FL 338132151

New Mailing Address:

FEI Number: 59-2110005

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROTH, DEBRA S
6874 SHIMMERING DR
LAKELAND, FL 33813 US

Name and Address of New Registered Agent:

PAYNE, DEBRA K
2311 ARROWHEAD BLVD.
LAKELAND, FL 33813 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: DEBRA PAYNE

04/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CASTILLO, RAQUEL
Address: 740 LAKE MIRIAM DR.
City-St-Zip: LAKELAND, FL 33813

Title: VP () Delete
Name: KLEINERT, CAROLYN
Address: 740 LAKE MIRIAM DR.
City-St-Zip: LAKELAND, FL 33813

Title: SD () Delete
Name: PAYNE, DEBBIE
Address: 740 LAKE MIRIAM DR.
City-St-Zip: LAKELAND, FL 33813

Title: TD () Delete
Name: ROTH, DEBRA S
Address: 6874 SHIMMERING DR.
City-St-Zip: LAKELAND, FL 33813

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HICKEY, GWENDOLYN
Address: 740 LAKE MIRIAM DR.
City-St-Zip: LAKELAND, FL 33813

Title: VP (X) Change () Addition
Name: SMITH, STEPAHNIE
Address: 740 LAKE MIRIAM DR.
City-St-Zip: LAKELAND, FL 33813

Title: SD (X) Change () Addition
Name: MOFFITT, SUSAN
Address: 740 LAKE MIRIAM DR.
City-St-Zip: LAKELAND, FL 33813

Title: TD (X) Change () Addition
Name: PAYNE, DEBRA K
Address: 2311 ARROWHEAD BLVD.
City-St-Zip: LAKELAND, FL 33813

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: DEBRA PAYNE

TD

04/20/2009

Electronic Signature of Signing Officer or Director

Date