2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755278

FILED Jul 18, 2007 Secretary of State

Entity Name: TARPON SPRINGS BAND BOOSTERS, INC.

Current Principal Place of Business:		New Principal Place of Business:		
	F ROAD SPRINGS HIGH SCH SPRINGS, FL 34689	OOL		
Current Mailing Address:		New Mailing Address:		
P.O. BOX (TARPON S	642 SPRINGS, FL 34688	US		
n accordan		F.S., the corporation did not receive	-	
WILLIAMS 1402 SILVI		US		
	named entity submits e of Florida.	this statement for the purpose	of changing i	ts registered office or registered agent, or both,
SIGNATUF	RE:			
SIGNATUF		ature of Registered Agent		Date
		-	ADDITION	
OFFICERS Fitle: Name: Address:	Electronic Sign	/E	ADDITION Title: Name: Address: City-St-Zip:	
OFFICER: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	Electronic Sign S AND DIRECTORS: P () Delete WILLIAMS, KAREN 1402 SILVER OAK DRIV	/E 34689	Title: Name: Address:	IS/CHANGES TO OFFICERS AND DIRECTORS
OFFICERS Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: City-St-Zip: City-St-Zip: City-St-Zip:	Electronic Sign S AND DIRECTORS: P () Delete WILLIAMS, KAREN 1402 SILVER OAK DRIV TARPON SPRINGS, FL VPD () Delete DEAS, EDWARD 436 PENT STREET	/E 34689 34689	Title: Name: Address: City-St-Zip: Title: Name: Address:	V (X) Change () Addition V (X) Change () Addition SMART, JANE 476 OAK CREEK LANE
DFFICERS Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Name: Name: Address:	Electronic Sign S AND DIRECTORS: P () Delete WILLIAMS, KAREN 1402 SILVER OAK DRIN TARPON SPRINGS, FL VPD () Delete DEAS, EDWARD 436 PENT STREET TARPON SPRINGS, FL TD () Delete SIEGEL, SCOTT 1713 MANDALAY DR	/E 34689 34689	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	IS/CHANGES TO OFFICERS AND DIRECTORS () Change () Addition V (X) Change () Addition SMART, JANE 476 OAK CREEK LANE PALM HARBOR, FL 34684 V (X) Change () Addition DUPLAIN, PATRICK 1770 BIARRITZ CIRCLE

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: MICHAEL RECHKEMER T 07/18/2007