2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Oct 20, 2009 **DOCUMENT# 755278** Secretary of State

Entity Name: TARPON SPRINGS BAND BOOSTERS, INC.

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

1411 GULF ROAD TARPON SPRINGS HIGH SCHOOL TARPON SPRINGS, FL 34689

New Mailing Address: Current Mailing Address:

P.O. BOX 642

TARPON SPRINGS, FL 34688 US

FEI Number: 59-2135073 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:

WILLIAMS, KAREN AMORELLO, JUDITH 2103 NORTH POINTE ALEXIS DRIVE 1402 SILVER OAK DRIVE

TARPON SPRINGS, FL 34689 TARPON SPRINGS, FL 34689 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: JUDITH AMORELLO 10/20/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete WILLIAMS, KAREN AMORELLO, JUDITH Name: Name:

1402 SILVER OAK DRIVE Address: 2103 NORTH POINTE ALEXIS DRIVE Address: City-St-Zip: TARPON SPRINGS, FL 34689 City-St-Zip: TARPON SPRINGS, FL 34689

() Delete Title: Title: (X) Change () Addition

AMORELLO, JUDY Name: NAVAS, ELAINE Name: Address: 2103 N.POINTE ALEXIS DRIVE Address: P.O. BOX 702

City-St-Zip: TARPON SPRINGS, FL 34689 City-St-Zip: TARPON SPRINGS, FL 34689

Title: () Delete Title: () Change () Addition

SMART, JANE Name: Name: 476 OAK CREEK LANE Address: Address: City-St-Zip: PALM HARBOR, FL 34684 City-St-Zip:

Title: () Delete Title: () Change () Addition

Name: FORD, LORI Name: 2930 REGAL OAK BLVD. Address: Address: City-St-Zip: PALM HARBOR, FL 34684 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

RECHKEMER, MICHAEL RIBECA, DEBORAH Name: Name:

103 DRIFTWOOD DRIVE WEST 1275 PARADISE LAKE DRIVE Address: Address: PALM HARBOR, FL 34683 City-St-Zip: TARPON SPRINGS, FL 34689 City-St-Zip:

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: DEBORAH C. RIBECA Т 10/20/2009