


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 07, 2007 8:00 am
Secretary of State

09-07-2007 90002 009 ****61.25

DOCUMENT # 761895 1. Entity Name NORTH MARION HIGH BAND BOOSTERS, INC.					
Principal Place of Business 151 W. HWY 329 CITRA, FL 32113			Mailing Address 151 W. HWY 329 CITRA, FL 32113		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2768138	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LILLY J. CRAIG 229 N.E. II AVE OCALA, FL 34470			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE P NAME MONDAY, J. SCOTT STREET ADDRESS 1305 E HWY 329 CITY-ST-ZIP CITRA, FL 32113	<input checked="" type="checkbox"/> Delete		TITLE President NAME Ed Tarlton STREET ADDRESS 169 NE 190 Street CITY-ST-ZIP Citra FL 32113	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE VP NAME BOSTON, CASSANDRA STREET ADDRESS PO BOX 8 CITY-ST-ZIP ORANGE LAKE, FL 32681	<input checked="" type="checkbox"/> Delete		TITLE VP NAME Debbie Marin STREET ADDRESS 12082 NE 150 Ave Rd CITY-ST-ZIP Ft McCoy FL 32134	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE D NAME CRAIG, LILLY J STREET ADDRESS 224 NE II AVE CITY-ST-ZIP OCALA, FL 34470	<input type="checkbox"/> Delete		TITLE Trustee NAME Chiaig Lilly STREET ADDRESS 224 NE II AVE CITY-ST-ZIP Ocala FL 34470	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE D NAME MONDAY, DONNA STREET ADDRESS 1305 E. HWY 359 CITY-ST-ZIP CITRA, FL 32113	<input checked="" type="checkbox"/> Delete		TITLE Robert Marin NAME 12082 NE 150 Ave Rd STREET ADDRESS Ft McCoy FL 32134 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE S NAME DELANO, KIMBERLY H STREET ADDRESS 13163 NE 44TH CT CITY-ST-ZIP ANTHONY, FL 32617	<input type="checkbox"/> Delete		TITLE Stacy Riedle Trustee NAME P.O. Box 685 STREET ADDRESS Span FL 32192 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE T NAME BOOTLE, BRENDA L STREET ADDRESS 15600 N.E. JACKSONVILLE RD CITY-ST-ZIP CITRA, FL 32113	<input type="checkbox"/> Delete		TITLE Suzanne Lilly NAME 224 NE II AVE STREET ADDRESS Ocala FL 34470 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Brenda Bootle</u>			<u>7/30/07</u>		<u>352-545-3316</u>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date</small>		<small>Daytime Phone #</small>