

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768686

FILED
May 15, 2009
Secretary of State

Entity Name: THE FIGHTING INDIANS BAND BOOSTERS, INC.

Current Principal Place of Business:

1707 16TH STREET
P.O. BOX 5124
VERO BEACH, FL 329615124

New Principal Place of Business:

1707 16TH STREET
VERO BEACH, FL 32961

Current Mailing Address:

1707 16TH STREET
P.O. BOX 5124
VERO BEACH, FL 329615124

New Mailing Address:

FEI Number: 59-2363376 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ALLEN, THERESA L
1745 17TH AVENUE SW
VERO BEACH, FL 32962 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ALLEN, TERI
Address: 1745 17TH AVE SW
City-St-Zip: VERO BEACH, FL 32962

Title: VP () Delete
Name: SALIS, CINDY
Address: 716 24TH SQUARE
City-St-Zip: VERO BEACH, FL 32962

Title: T () Delete
Name: FORGHAM, EARL
Address: 4110 12TH PLACE SW
City-St-Zip: VERO BEACH, FL 32968

Title: RS () Delete
Name: ATHERON, MARGARET
Address: 1769 CORAL WAY S
City-St-Zip: VERO BEACH, FL 32963

Title: CS () Delete
Name: CHAPPELEAR, BRENDA
Address: 161 9TH DRIVE
City-St-Zip: VERO BEACH, FL 32962

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: EARL FORGHAM

T

05/15/2009

Electronic Signature of Signing Officer or Director

Date