2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N01000001048

FILED Nov 07, 2006 Secretary of State

Entity Name: SILVER TRAIL MIDDLE SCHOOL BAND PARENTS ASSOCIATION, INC.

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

C/O SILVER TRAIL MIDDLE SCHOOL BAND DIR. 18300 SHERIDAN STREET PEMBROKE PINES, FL 33331

New Mailing Address: Current Mailing Address:

C/O SILVER TRAIL MIDDLE SCHOOL BAND DIR. 18300 SHERIDAN STREET PEMBROKE PINES, FL 33331

FEI Number: 26-2725784 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:

KAYE, ROBERT ESQ. KAYE & ROGER, P.A. 6261 NW 6TH WAY SUITE 103 FORT LAUDERDALE, FL 33309 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: ROBERT KAYE

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

PEREZ, ROSA ALVAREZ, CELIA Name: Name: 2330 NW 189TH AVE. 253 SW 161 AVE Address: Address:

City-St-Zip: PEMBROKE PINES, FL 33029 City-St-Zip: PEMBROKE PINES, FL 33027

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

TRUTTO-MARK, MARIA Name: PEREZ, ROSA Name:

Address: 1280 NW 155 AVE Address: 2330 NW 189TH AVE. City-St-Zip: PEMBROKE PINES, FL 33029 City-St-Zip: PEMBROKE PINES, FL 33029

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

FORTE, CAROL Name: Name:

Address: 2369 NW 184TH TERR. Address: City-St-Zip: PEMBROKE PINES, FL 33029 City-St-Zip:

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

Name: HILLER, STEVEN Name: Address: 19361 NW 10TH ST. Address: City-St-Zip: PEMBROKE PINES, FL 33029 City-St-Zip:

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

Name: ALVAREZ, CELIA Name: 253 SW 161 AVE Address: Address: PEMBROKE PINES, FL 33027 City-St-Zip: City-St-Zip:

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

HILLER, ANN Name: Name: Address: 19361 NW 10 ST Address: PEMBROKE PINES, FL 33029 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: STEVEN HILLER TD 11/07/2006