

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006281

FILED  
Apr 27, 2006  
Secretary of State

Entity Name: WARRIOR BAND PARENT ASSOCIATION, INC.

## Current Principal Place of Business:

C/O BAND DIRECTOR  
6425 MIAMI LAKEWAY NORTH  
MIAMI LAKES, FL 33014

## New Principal Place of Business:

## Current Mailing Address:

C/O BAND DIRECTOR  
6425 MIAMI LAKEWAY NORTH  
MIAMI LAKES, FL 33014

## New Mailing Address:

FEI Number: 65-0966615      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

MARTIN, CARMEN S  
15462 TURNBULL DR.  
MIAMI LAKES, FL 33014      US

## Name and Address of New Registered Agent:

GOMEZ, VIRGINIA  
6450 NW 170 TERRACE  
MIAMI, FL 33015      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: VIRGINIA GOMEZ

04/27/2006

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SILVA, JANILLE  
Address: 6425 MIAMI LAKEWAY DR  
City-St-Zip: HIALEAH, FL 33014

Title: CT ( ) Delete  
Name: SUAREZ, ELAYNE  
Address: 6425 MIAMI LAKEWAY DR  
City-St-Zip: HIALEAH, FL 33014

Title: TD ( ) Delete  
Name: GOMEZ, VIRGINIA  
Address: 6425 NUANU KAJEWAT DR  
City-St-Zip: HIALEAH, FL 33014

Title: VP ( ) Delete  
Name: PERDIGON, DAMARIS  
Address: 6425 MIAMI LAKEWAY DR.  
City-St-Zip: MIAMI LAKES, FL 33014

Title: S (X) Delete  
Name: MARTIN, CARMEN  
Address: 6425 MIAMI LAKEWAY DR.  
City-St-Zip: MIAMI LAKES, FL 33014

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition  
Name: FLORES, VANESSA  
Address: 6425 MIAMI LAKEWAY DR  
City-St-Zip: HIALEAH, FL 33014

Title: TD (X) Change ( ) Addition  
Name: GOMEZ, VIRGINIA  
Address: 6425 MIAMI LAKEWAY DR  
City-St-Zip: HIALEAH, FL 33014

Title: S (X) Change ( ) Addition  
Name: CARVAJAL, MARIBEL  
Address: 6425 MIAMI LAKEWAY DR.  
City-St-Zip: MIAMI LAKES, FL 33014

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: VIRGINIA GOMEZ

TD

04/27/2006

Electronic Signature of Signing Officer or Director

Date