2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N0100006671

#~∉ntity Name

DUNBAR HIGH SCHOOL BAND BOOSTER CLUB, INC.

Principal Place of Business

Mailing Address

3800 E. EDISON AVENUE FORT MYERS FL 33916

3800 E. EDISON AVENUE FORT MYERS FL 33916 FILED Jul 17, 2002 8:00 am Secretary of State

05-15-2002 90122 033 ****61.25

2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) REED. JOHN C CPA 12734 KENWOOD LANE SUITE 32 FORT MYERS FL 33907 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE After September 13, 2002, 9. Election Campaign Financing \$5.00 May Be Make Check Payable to min. will be \$236.25. Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITI F ☐ Delete TITLE PD ☐ Change **Addition** NAME RANDY ROSS NAME STREET ADDRESS 1003 MAGNOLIA AVE STREET ADDRESS CITY-ST-7IP LEHIGH ACRES, FL 33936-8130 CITY-ST-ZIP TITLE ☐ Delete TITI F Change **★** Addition CINDY WASHINGTON NAME STREET ADDRESS 16971 CHURCH DR STREET ADDRESS CITY-ST-ZIP FORT MYERS, FL 33917-2645 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Chang X Addition NAME DEBBIE COPPING STREET ADDRESS 4201 SE 1ST CT STREET ADDRESS CITY-ST-ZIP CAPE CORAL, FL 33904-8463 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change **M** Addition T D NAME NAME SUSIE GREEN STREET ADDRESS STREET ADDRESS 4920 CEDAR HAMMOCK CT CITY-ST-ZIP CITY-ST-ZIP FORT MYERS, FL 33905-6629 TITLE ☐ Delete TITLE ☐ Change X Addition NAME n NAME JOHN REED STREET ADDRESS STREET ADDRESS 12734 KENWOOD LANE, STE. 32 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ Delete

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

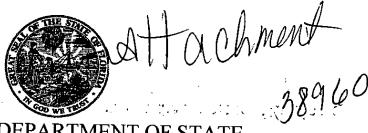
WASCATUFICESCUIREJour Need Director 7-12-02 239-939-55

FORT MYERS, FL 33907-5639

☐ Change

☐ Addition

5/15/2002-90122-033-\$61.25-\$61.25 2002 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # N0100006671 DUNBAR HIGH SCHOOL BAND BOOSTER CLUB, INC. Principal Place of Business Mailing Address 3800 E. EDISON AVENUE 3800 E. EDISON AVENUE FORT MYERS FL 33916 FORT MYERS FL 33916 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Not Applicable Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required -6. Name and Address of Current Registered Agent. 7. Name and Address of New Registered Agent Name REED, JOHN C CPA Street Address (P.O. Box Number is Not Acceptable) 12734 KENWOOD LANE SUITE 32 FORT MYERS FL 33907 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing $q_{\hat{q}}$ FILE NOW: FEE IS \$61,25 \$5.00 May Be Make Check Payable to \Box Trust Fund Contribution. Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE ☐ Change **X** Addition (9/01 RANDY ROSS 1003 MAGNOLIA AVE NAME MALIE STREET ADDRESS. STREET ADDRESS CR2E037 CITY-ST-ZIP LEHIGH ACRES, FL 33936-8130 CITY-ST-7P TITLE ☐ Delete TITLE Addition ☐ Change NAME CINDY WASHINGTON 16971 CHURCH DR N. FORT MYEAS F NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FL 33917-2645 CITY-ST-ZIP c TITLE ☐ Delete TITLE Addition DEBBIE COPPING TO NAME STREET ADDRESS STREET ADDRESS CAPE CORAL CITY-ST-ZIP 33904-8463 CITY-ST-ZIP SUSIE GREEN CHANGE KANNING TOTAL HANN OCK CT FORT MYERS FL 33905-4429 TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-\$T-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE D Change **Addition** NAME John need NAME STREET ADDRESS STREET ADDRESS 12734 Kenwoodlane, Suite32 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME . Name STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State
Secretary of Secretary

May 23, 2002

DUNBAR HIGH SCHOOL BAND BOOSTER CLUB, INC. 3800 E. EDISON AVENUE FORT MYERS, FL 33916

Subject: DUNBAR HIGH SCHOOL BAND BOOSTER CLUB, INC.

Reference Number: . .

N01000006671

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$61.25; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Florida nonprofit corporations are required to have at least 3 directors or trustees. Please place the letter "D" or "T" beside the names and business addresses of each director or trustee.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/ML ANNUAL REPORTS SECTION