2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006671

Apr 21, 2006 Secretary of State

Entity Name: DUNBAR HIGH SCHOOL BAND BOOSTER CLUB, INC. **Current Principal Place of Business: New Principal Place of Business:** 3800 E. EDISON AVENUE FORT MYERS, FL 33916 **Current Mailing Address: New Mailing Address:** 3800 E. EDISON AVENUE FORT MYERS, FL 33916 FEI Number: 65-1139510 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: REED, JOHN C CPA 12734 KENWOOD LANE SUITE 32 FORT MYERS, FL 33907 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition FRANKS, BEVERLY Name: Name: 18790 RIVER EAST LANE Address: Address: ALVA, FL 33920 US City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition THOMPSON, SANDRA Name: Name: Address: 740 HARRY AVENUE Address: City-St-Zip: LEHIGH ACRES, FL 33971 US City-St-Zip: Title: () Delete Title: (X) Change () Addition JACKSON, VERONICA HUDSON, CHARLETTE L Name: Name: 845 DELLENA LANE Address: Address: 3274 C STREET City-St-Zip: FORT MYERS, FL 33905 US City-St-Zip: FORT MYERS, FL 33916 US Title: TD () Delete Title: D (X) Change () Addition Name: LEY, MELISSA J Name: REED, JOHN 12734 KENWOOD LANE STE 32 Address: **1621 SW 31ST STREET** Address: City-St-Zip: CAPE CORAL, FL 33914 US City-St-Zip: FORT MYERS, FL 33907563 US Title: (X) Delete Title: () Change () Addition REED, JOHN Name: Name: 12734 KENWOOD LANE STE 32 Address: Address: City-St-Zip: FORT MYERS, FL 339075639 US 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: CHARLETTE L HUDSON TD 04/21/2006