

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006671

FILED  
May 17, 2007  
Secretary of State

**Entity Name:** DUNBAR HIGH SCHOOL BAND BOOSTER CLUB, INC.

**Current Principal Place of Business:**

3800 E. EDISON AVENUE  
FORT MYERS, FL 33916

**New Principal Place of Business:**

**Current Mailing Address:**

3800 E. EDISON AVENUE  
FORT MYERS, FL 33916

**New Mailing Address:**

**FEI Number:** 65-1139510      **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:**

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:**

Title: PD ( ) Delete  
Name: FRANKS, BEVERLY  
Address: 18790 RIVER EAST LANE  
City-St-Zip: ALVA, FL 33920 US

Title: VPD ( ) Delete  
Name: THOMPSON, SANDRA  
Address: 740 HARRY AVENUE  
City-St-Zip: LEHIGH ACRES, FL 33971 US

Title: TD ( ) Delete  
Name: HUDSON, CHARLETTE L  
Address: 3274 C STREET  
City-St-Zip: FORT MYERS, FL 33916 US

Title: D ( ) Delete  
Name: REED, JOHN  
Address: 12734 KENWOOD LANE STE 32  
City-St-Zip: FORT MYERS, FL 33907563 US

**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:

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: CHARLETTE L HUDSON

TD

05/17/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date