

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
May 01, 2006  
Secretary of State**

DOCUMENT# N02000000967

Entity Name: AIR BASE ELEMENTARY MUSIC BOOSTER ASSOCIATION, INC.

**Current Principal Place of Business:**

12829 SW 272 STREET  
HOMESTEAD, FL 33032

**New Principal Place of Business:**

**Current Mailing Address:**

12829 SW 272 STREET  
HOMESTEAD, FL 33032

**New Mailing Address:**

FEI Number: 01-0621535      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:**

MAAS, JOHN P ESQ  
44 NE 16 STREET  
HOMESTEAD, FL 33030      US

**Name and Address of New Registered Agent:**

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: SEC      ( ) Delete  
Name: REEVES, MARYANN  
Address: 25790 SW 123 AVE  
City-St-Zip: HOMESTEAD, FL 33030 US

Title: T      ( ) Delete  
Name: MEULENER, ALICIA A  
Address: 2206 PORTFINO AVE  
City-St-Zip: HOMESTEAD, FL 33033 US

Title: P      ( ) Delete  
Name: FRANK, CAROL  
Address: 9001 SW 196 DRIVE  
City-St-Zip: MIAMI, FL 33157 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:

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: ALICIA MEULENER

T

05/01/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date