

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001855

FILED  
Apr 30, 2004  
Secretary of State

**Entity Name:** PORT CHARLOTTE HIGH SCHOOL BAND BOOSTERS, INC.

**Current Principal Place of Business:**

18200 TOLEDO BLADE BLVD.  
PORT CHARLOTTE, FL 33948

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 381257  
PORT CHARLOTTE, FL 33938

**New Mailing Address:**

**FEI Number:** 03-0406114

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

YURKOVITCH, AMY JO  
561 CHAMBER STREET  
PORT CHARLOTTE, FL 33948

**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: PT ( ) Delete  
Name: PETTY, GLENN B  
Address: 1198 WINSTON STREET  
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: D ( ) Delete  
Name: LOPEZ, JOSE A JR.  
Address: 7265 PELAS CIRCLE  
City-St-Zip: N. FORT MYERS, FL 33917

Title: ST ( ) Delete  
Name: MOODY, SHERRIE M  
Address: 18412 MEYER AVENUE  
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: T ( ) Delete  
Name: YURKOVITCH, AMY JO  
Address: 561 CHAMBERS STREET  
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: VPT ( ) Delete  
Name: MOODY, JOHN  
Address: 18257 EBLIS AVE.  
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: ST (X) Change ( ) Addition  
Name: GRAVESEN, DEBORAH  
Address: 128 WATERSIDE ST.  
City-St-Zip: PORT CHARLOTTE, FL 33948

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

Title: VPT (X) Change ( ) Addition  
Name: CRANE, DAVID  
Address: 251 MENTEL TERR  
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: T ( ) Change (X) Addition  
Name: FERGUSON, LINDA  
Address: 1406 AKEN ST,  
City-St-Zip: PORT CHARLOTTE, FL 33952

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JOSE A LOPEZ

D

04/30/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date