2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003604

FILED Apr 12, 2005 Secretary of State

Entity Name: BAND OF THE HOUR ASSOCIATION OF ALUMNI AND FRIENDS, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
FILLMORE	AMARO DR E HALL 201 ABLES, FL 33	3146				
Current Mailing Address:			New Maili	New Mailing Address:		
FILLMORE	AMARO DR E HALL 201 ABLES, FL 33	3146				
El Number	: 94-0472650	FEI Number Applied For ()	FEI Number Not Appl	licable () Certificate of Status Desired ()		
Name and	Address of (Current Registered Agent:	Name and	Address of New Registered Agent:		
9130 S DA	CHARD C ADELAND BLV 331567848 L					
	e named entity e of Florida.	submits this statement for the p	ourpose of changing i	ts registered office or registered agent, or both,		
SIGNATUI	RE:					
	Electro	nic Signature of Registered Age	ent	Date		
OFFICER	S AND DIREC	TORS:	ADDITION	IS/CHANGES TO OFFICERS AND DIRECTOR		
Fitle: Name: Address: Dity-St-Zip:	DP (LASSO, CIND) 6450 W. 21ST HIALEAH, FL:	COURT	Title: Name: Address: City-St-Zip:	() Change () Addition		
Γitle: Name: Address: City-St-Zip:	DVP (LEWIS, MICKI 14565 S.W. 75 MIAMI, FL 331	S AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition		
lame: Address: City-St-Zip: Title: Jame: Address:	LEWIS, MICKI 14565 S.W. 75 MIAMI, FL 331	5 AVENUE 158) Delete AN VS BLVD.	Name: Address:	DT (X) Change () Addition BAGIEREK, JOSEPH 2929 W. TRADE AVE		
√ame: √ddress:	LEWIS, MICKI 14565 S.W. 75 MIAMI, FL 331 DT (SCHAFER, DE 1368 MEADOV WESTON, FL DEXS (TALLMAN, HEI 7601 SW 94 A	6 AVENUE 158) Delete AN VS BLVD. 33327) Delete LEN VENUE	Name: Address: City-St-Zip: Title: Name: Address:	DT (X) Change () Addition BAGIEREK, JOSEPH 2929 W. TRADE AVE		
lame: Address: City-St-Zip: Title: Jame: Address: City-St-Zip: Title: Jame: Address:	LEWIS, MICKI 14565 S.W. 75 MIAMI, FL 331 DT (SCHAFER, DE 1368 MEADOV WESTON, FL DEXS (TALLMAN, HEI 7601 SW 94 A MIAMI, FL 331	5 AVENUE 158) Delete AN VS BLVD. 33327) Delete LEN VENUE 173) Delete ETTA VENUE	Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	DT (X) Change () Addition BAGIEREK, JOSEPH 2929 W. TRADE AVE CORAL GABLES, FL 33133		

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: JOSEPH ENNEN BAGIEREK DT 04/12/2005