

# 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

<b>DOCUMENT # N02000007683</b> 1. Entity Name <b>SPACE COAST JR/SR HIGH SCHOOL BAND BOOSTER CLUB INC.</b>						FILED 06 NOV -7 3:19 TREASURY	
Principal Place of Business <b>6150 BANYAN STREET COCOA, FL 32927</b>				Mailing Address <b>6393 DEPOT AVENUE COCOA, FL 32927</b>			
2. Principal Place of Business		3. Mailing Address <b>c/o Kenneth S. Kennedy 1333 Cheney Hwy, Unit F</b>					
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 		<b>REINSTATEMENT 2006</b> <small>10312005 REIN-NE 1032006 (11/05)</small>		4. FEI Number <b>51-0430769</b>	
City & State 		City & State <b>Titusville, FL</b>		Applied For <input type="checkbox"/> Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
Zip 		Country 		Zip <b>32780</b>		Country <b>USA</b>	
6. Name and Address of Current Registered Agent  <b>WALSH, FRANCES A 6393 DEPOT AVENUE COCOA, FL 32927</b>				7. Name and Address of New Registered Agent Name <b>Kenneth S. Kennedy</b> Street Address (P.O. Box Number is Not Acceptable) <b>1333 Cheney Highway, Unit F</b> City <b>Titusville</b> <b>FL</b> Zip Code <b>32780</b>			
8. 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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE <small>Signature, typed or printed name of registered agent and title if applicable</small>				SIGNATURE <small>(NOTE: Registered Agent signature required when reinstating)</small>			
<b>FILE NOW!!! FEE IS \$236.25</b> <b>After January 1, 2007, Fee will be \$297.50</b>				<b>Make check payable to</b> <b>Florida Department of State</b>			
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE P NAME WALSH, FRANCES A STREET ADDRESS 6393 DEPOT AVENUE CITY-ST-ZIP COCOA, FL 32927	<input checked="" type="checkbox"/> Delete			TITLE <b>President</b> NAME <b>Kenneth S. Kennedy</b> STREET ADDRESS <b>1333 Cheney Hwy, Unit F</b> CITY-ST-ZIP <b>Titusville, FL 32780</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE VP NAME COLE, GEORGE M JR STREET ADDRESS 970 DAYTONA STREET CITY-ST-ZIP COCOA, FL 32927	<input type="checkbox"/> Delete			TITLE <b>Director</b> NAME <b>Patty Lowe</b> STREET ADDRESS <b>6150 Banyan Street</b> CITY-ST-ZIP <b>Cocoa, FL 32927</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE T NAME WALSH, BARBARA STREET ADDRESS 5181 BRIDGE ROAD CITY-ST-ZIP COCOA, FL 32927	<input checked="" type="checkbox"/> Delete			TITLE <b>Treasurer</b> NAME <b>Barbara Wallace</b> STREET ADDRESS <b>5181 Bridge Road</b> CITY-ST-ZIP <b>Cocoa, FL 32927</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE S NAME THORH, CHERYL STREET ADDRESS 6545 ORCHID AVENUE CITY-ST-ZIP COCOA, FL 32927	<input type="checkbox"/> Delete			TITLE <b>Director</b> NAME <b>Bonnie Harmon</b> STREET ADDRESS <b>5224 Maravoss Street</b> CITY-ST-ZIP <b>Cocoa, FL 32927</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE D NAME THOMPSON, LEE SR STREET ADDRESS 4331 CAPER COURT CITY-ST-ZIP TITUSVILLE, FL 32796	<input type="checkbox"/> Delete			TITLE <b>Director</b> NAME <b>Rebecca Thompson</b> STREET ADDRESS <b>4331 Caper Court</b> CITY-ST-ZIP <b>Titusville, FL 32796</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE <b>SECRETARY</b> NAME <b>LEE SSSS180000</b> STREET ADDRESS <b>600--80010--90/20/11</b> CITY-ST-ZIP <b>600--80010--90/20/11</b>	<input type="checkbox"/> Delete			TITLE <b>Director</b> NAME <b>Donna Stull</b> STREET ADDRESS <b>6150 Baltimore Ave.</b> CITY-ST-ZIP <b>Cocoa, FL 32927</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.							
SIGNATURE:				SIGNATURE:			
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				<small>Date Daytime Phone #</small>			

1052

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ATTACHMENT TO:

Document #N02000007683

November 3, 2006

2006 Not-For-Profit Corporation Reinstatement

Item 11 Additions/Changes to Officers and Directors in 10

Director [x] Addition

Connie Wink

6580 Corsica Boulevard

Cocoa, FL 32927

Director [x] Addition

Ronnie Sorey

5555 Datura Street

Cocoa, FL 32927

Director [x] Addition

Andrea Santoso

4475 Greenhill Street

Cocoa, FL 32927

Director [x] Addition

Marianne Rigolini

6741 Hartford Road

Cocoa, FL 32927

Signed:

  
Kenneth S. Kennedy

Date

11/3/06

Daytime Phone#

3213026297