2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 01, 2009
Secretary of State

DOCUMENT# N03000005111

Entity Name: ST. CLOUD HIGH SCHOOL BAND BOOSTERS INC.

Current Principal Place of Business:

2000 BULLDOG LANE
SAINT CLOUD, FL 34769 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 701256
SAINT CLOUD, FL 34770 US

New Mailing Address:

FEI Number: 20-0134380 **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:

PHILLIPS, JEAN M
642 DAVID DR.
SAINT CLOUD, FL 34769 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: P ( ) Delete
Name: PHILLIPS, JEAN M
Address: 642 DAVID DR.
City-St-Zip: ST. CLOUD, FL 34769 US

Title: T ( ) Delete
Name: KITZMILLER, SHARON
Address: 3095 COMANCHE RS
City-St-Zip: SAINT CLOUD, FL 34772 US

Title: VP ( ) Delete
Name: RAPINISI, TONI
Address: 1253 MYRTLE AVE.
City-St-Zip: ST CLOUD, FL 34769 US

Title: S ( ) Delete
Name: DICKSON, MARYLEE
Address: 416 CHANCELLOR CT
City-St-Zip: ST. CLOUD, FL 34769 US

Title: TA ( ) Delete
Name: COMPTON, SUSAN
Address: 121 WYOMING AVE.
City-St-Zip: ST.CLOUD, FL 34769 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition
Name: KITZMILLER, SHARON
Address: 3095 COMANCHE RD
City-St-Zip: SAINT CLOUD, FL 34772 US

Title: T (X) Change ( ) Addition
Name: GERENA, JENAFFER
Address: 237 ST. CLOUD VILLA CT. APT 4
City-St-Zip: KISSIMMEE, FL 34744 US

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

Title: TA (X) Change ( ) Addition
Name: CAINES, TIMOTHY
Address: 2950 COOL BREEZE CIRCLE
City-St-Zip: ST.CLOUD, FL 34769 US

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: JEAN M PHILLIPS P 07/01/2009

Electronic Signature of Signing Officer or Director — Date