2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 29, 2008 8:00 am Secretary of State 04-29-2008 90096 014 ****61.25

Applied For Place of Business - No P.C. Bc. # 3.8 RIONAN TR TALLAHASSEE, FL 32311 2. Pinnopse Place of Business - No P.C. Bc. # 3. Mailing Address Sulle, Apt. #, etc. O1082008 CngNP CR2E037 (12/06) 2. Pinnopse Place of Business - No P.C. Bc. # 3. Mailing Address Sulle, Apt. #, etc. O1082008 CngNP CR2E037 (12/06) 2. Pinnopse Place of Business - No P.C. Bc. # 3. Mailing Address O1082008 CngNP CR2E037 (12/06) 2. Pinnopse Place of Business - No P.C. Bc. # 3. Mailing Address O1082008 CngNP CR2E037 (12/06) 2. Pinnopse Place of Business - No P.C. Bc. # 3. Mailing Address O1082008 CngNP CR2E037 (12/06) 2. Pinnopse Place of Business - No P.C. Bc. # 3. Mailing Address O1082008 CngNP CR2E037 (12/06) 2. Pinnopse Place of Business - No P.C. Bc. # 3. Mailing Address O1082008 CngNP CR2E037 (12/06) 2. Pinnopse Place of Business - No P.C. Bc. # 3. Mailing Address O1082008 CngNP CR2E037 (12/06) 2. Pinnopse Place of Business - No P.C. Bc. # 3. Mailing Address O1082008 CngNP CR2E037 (12/06) 2. Pinnopse Place of Business - No P.C. Bc. # 3. Mailing Address O1082008 CngNP CR2E037 (12/06) 2. Pinnopse Place of Business - No P.C. Bc. # 3. Mailing Address O1082008 CngNP CR2E037 (12/06) 2. Pinnopse Place of Business - No P.C. Bc. # 3. Mailing Address O1082008 CngNP CR2E037 (12/06) 2. Country	1. Enlity Name LINCOLN HIGH BAND BOOSTERS, INC.								04-29-200	90090	014	01.23	
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City & State	Principal Place of Business - No P.O. Box # 3. Ma			Mailing Address ,									
T1-0952467	Suite, Apt. #, etc.			Sui	Suite, Apt. #, etc.				01082008 Cr	ng-NP	CR2E03	7 (12/06)	
S. Certificate of Status Desired Fee Required S. Certificate of Status Desired Fee Required WOLFF, TIM 3838 TROJAN TR TALLAHASSEE, FL 32311 Sireat Address (P.O. Box Number is Not Acceptable) City FL Zip Code S. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Plorida. I am familiar with, and accept the ordigations of registered agent, or both, in the State of Plorida. I am familiar with, and accept the ordigations of registered agent, or both, in the State of Plorida. I am familiar with, and accept the ordigations of registered agent, or both, in the State of Plorida. I am familiar with, and accept the ordigations of registered agent, or both, in the State of Plorida. I am familiar with, and accept the ordigations of registered agent, or both, in the State of Plorida. I am familiar with, and accept the ordigations of registered agent, or both, in the State of Plorida. I am familiar with, and accept the ordigations of registered agent, or both, in the State of Plorida. I am familiar with, and accept the ordigations of registered agent, or both, in the State of Plorida. I am familiar with, and accept the ordigations of registered agent, or both, in the State of Plorida. I am familiar with, and accept the ordigation of registered agent, or both, in the State of Plorida. I am familiar with, and accept the ordigation of registered agent, or both, in the State of Plorida. I am familiar with, and accept the ordigation of registered agent, or both, in the State of Plorida. I am familiar with, and accept the ordigation of registered agent, or both, in the State of Plorida. I am familiar with, and accept the ordigation of registered agent, or both, in the State of Plorida. I am familiar with, and accept the ordigation of registered agent, or registe	City & State		City	City & State				74 0050467					
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Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code 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 Plorida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Filling Foe is \$61.25 Due by May 1, 2008 9. Elocion Campaign Financing Toust Fund Controlution. Addition Addition MAE WOLFF, TIM SIREI ADDRESS 3838 TROJAN TR TALLAHASSEE, FL 32311 TILE SIREI ADDRESS 3838 TROJAN TR TALLAHASSEE, FL 32311 TILE SIREI ADDRESS TALLAHASSEE, FL 32311 TILE TALLAHASSEE, FL 32311 TILE SIREI ADDRESS TALLAHASSEE, FL 32311 TILE TALLAHASSEE, FL 32311 T		6. Name	and Address of Currer	t Registere	d Agent				7. Name and Add	ress of New F	Registered A	.gent	
Signature Signature Proceedings Procedure Pro	14101 55 7						Name						
City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept me obligations of registered agent. SIGNATURE Signature, hipside or proted name of required agent and title if auchicable.	3838 TRO.	JAN TR	32311			Street Address			P.O. Box Number is f	Not Acceptabl	e)		
B. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature typiqui or preted name of registered agent and tall a applicable. (NOTE Repatited Agent agentale required whon rentrating) DATE							1						
SIGNATURE Signature, typical or printed name of registered agent and tree if apocacione. (NOTE: Registered Agent signature required whom retinating) DATE							City				FL	Zip Code	9
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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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 4-110-08 850 - 878-4714 Daytime Phone # SIGNATURE: __