



**2005 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jun 24, 2005 8:00 am**  
**Secretary of State**

06-24-2005 90001 017 \*\*\*\*70.00

<b>DOCUMENT # N04000004891</b> 1. Entity Name <b>LAFAYETTE BAND BOOSTERS, INC.</b>																													
Principal Place of Business <b>160 NE HORNET DR. MAYO, FL 32066</b>				Mailing Address <b>6277 S. CR 349 BRANFORD, FL 32008</b>																									
2. Principal Place of Business  Suite, Apt. #, etc.		3. Mailing Address <b>6111 S. SR-349</b> Suite, Apt. #, etc.																											
City & State <b>Branford</b>		City & State <b>Branford</b>		4. FEI Number 05122005    Chg-NP    CR2E037 (10/03)																									
Zip <b>32008</b>		Country <b>USA</b>		5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>																									
6. Name and Address of Current Registered Agent  <b>ARNOLD, LANA K 6277 S. CR 349 BRANFORD, FL 32008</b>				7. Name and Address of New Registered Agent Name <b>Shelly Hayden</b> Street Address (P.O. Box Number is Not Applicable) <b>6111 S. SR-349</b> <b>Branford FL</b> City <b>FL 32008</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. <i>please send info of obligations</i> SIGNATURE <b>Shelly Hayden, Chairman 6-17-05</b> <small>Signature, typed or printed name of registered agent and true if applicable. (NOTE: Registered Agent signature required when reinstating.)</small>																													
<b>Filing Fee is \$61.25 Due by September 7, 2005</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		<b>Make check payable to Florida Department of State</b>																								
<b>10. OFFICERS AND DIRECTORS</b>				<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>																									
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12. I hereby certify that the information supplied with this filing does not qualify 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 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. <b>SIGNATURE: <i>Teressa "Shelly" Hayden</i> 6-17-05 386-935-4820</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR    Date    Daytime Phone #</small>																													