

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001151

FILED  
Feb 08, 2009  
Secretary of State

**Entity Name:** CORAL GLADES BAND AND COLOR GUARD BOOSTER ASSN. INC.

**Current Principal Place of Business:**

429 NW 120 DRIVE  
CORAL SPRINGS, FL 33071

**New Principal Place of Business:**

**Current Mailing Address:**

429 NW 120 DRIVE  
CORAL SPRINGS, FL 33071

**New Mailing Address:**

**FEI Number:** 20-1369804

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SCHAUBEN, LISA  
429 NW 120 DRIVE  
CORAL SPRINGS, FL 33071 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: V ( ) Delete  
Name: FLAGER, LAURA  
Address: 12777 NW 16TH COURT  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: T ( ) Delete  
Name: SCHAUBEN, LISA  
Address: 429 NW 120 DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: P (X) Delete  
Name: NIXON, MARYANN  
Address: 3162 NW 114 LN  
City-St-Zip: CORAL SPRINGS, FL 33065

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: FLAGER, LAURA  
Address: 12777 NW 16TH COURT  
City-St-Zip: CORAL SPRINGS, FL 33071

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

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

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: LISA SCHAUBEN

T

02/08/2009

Electronic Signature of Signing Officer or Director

Date