

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004790

FILED  
May 23, 2006  
Secretary of State

**Entity Name:** BROWARD BAND BOOSTER'S FOUNDATION, INC.

**Current Principal Place of Business:**

POST OFFICE BOX 9366  
FORT LAUDERDALE, FL 33310

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 9366  
FORT LAUDERDALE, FL 33310

**New Mailing Address:**

**FEI Number:** 75-3172905      **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:**

CARTER, ANTHONY  
3701 NW 26TH STREET  
LAUDERDALE LAKES, FL 33311      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: C      ( ) Delete  
Name: SNYDER, LAMONT  
Address: 4270 173 DRIVE  
City-St-Zip: MIAMI, FL 33055

Title: D      ( ) Delete  
Name: TAYLOR, JEFF  
Address: 1343 NW 13TH AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: D      ( ) Delete  
Name: THOMAS, JUANITA  
Address: 4350 NW 11TH STREET  
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: D      ( ) Delete  
Name: ADAMS, BARBARA  
Address: 1491 NW 19TH CT  
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: D      ( ) Delete  
Name: THOMPSON, JACQUIE  
Address: 3231 NW 177 TR.  
City-St-Zip: HOLLYWOOD, FL 33023

Title: D      ( ) Delete  
Name: CARTER, ANTHONY  
Address: 3701 NW 26TH STREET  
City-St-Zip: LAUDERDALE LAKES, FL 33311

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

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

Title: D      (X) Change ( ) Addition  
Name: LILLIE, MACKEY  
Address: 2670 NW 24TH COURT  
City-St-Zip: FORT LAUDERDALE, FL 33311

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

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

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 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: LILLIE MACKEY

D

05/23/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date