2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 21, 2008
Secretary of State

DOCUMENT# N05000010164

Entity Name: BRADEN RIVER HIGH SCHOOL BAND BOOSTER ASSOCIATION, INC.

Current Principal Place of Business:

6545 STATE ROAD 70 EAST
BRADENTON, FL 34203

New Principal Place of Business:

Current Mailing Address:

6545 STATE ROAD 70 EAST
BRADENTON, FL 34203

New Mailing Address:

FEI Number: 20-3129838 **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:

CARRIER, KENDALL
6545 STATE ROAD 70 EAST
BRADENTON, FL 34203 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: D ( ) Delete
Name: DEMERS, MARIA
Address: 4820 77TH ST. E.
City-St-Zip: BRADENTON, FL 34203

Title: D ( ) Delete
Name: CARRIER, KENDALL
Address: 6545 ST RD 70 EAST
City-St-Zip: BRADENTON, FL 34203

Title: DW ( ) Delete
Name: VEINZIERL, KELLY
Address: 4843 9TH AVENUE E
City-St-Zip: BRADENTON, FL 34208

Title: D ( ) Delete
Name: HARGEN, BETTI
Address: 2104 70TH ST CT E.
City-St-Zip: BRADENTON, FL 34208

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: GORE, MARLENA M
Address: 5608 34TH CT. EAST
City-St-Zip: BRADENTON, FL 34203

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

Title: DW (X) Change ( ) Addition
Name: FUNK, SUANNE
Address: 4104 WOLF RIDGE CROSSING
City-St-Zip: PARRISH, FL 34219

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

Title: D ( ) Change (X) Addition
Name: MIDGETT, KIM
Address: 6142 36TH LANE E
City-St-Zip: BRADENTON, FL 34203

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: KENDALL CARRIER D 07/21/2008

Electronic Signature of Signing Officer or Director — Date