## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000001585

FILED May 10, 2008 Secretary of State

Current P	rincipal Place of Business:	New Principal Place	of Business:
ATTN: BA	IALINDA BLVD ND DIRECTOR RAL, FL 33914		
Current M	lailing Address:	New Mailing Address	s:
ATTN: BA	IALINDA BLVD ND DIRECTOR RAL, FL 33914		
	nce with s. 607.193(2)(b), F.S., the corporation d	lid not receive the prior notice.	Certificate of Status Desired ( )
Name and	d Address of Current Registered Agent	t: Name and Address o	of New Registered Agent:
	R BAND BOOSTERS		
ATTN: BA	IALINDA BLVD ND DIRECTIOR RAL, FL 33914 US		
ATTN: BA CAPE CO The above	IALINDA BLVD ND DIRECTIOR	the purpose of changing its registere	d office or registered agent, or both,
ATTN: BA CAPE CO The above	IALINDA BLVD ND DIRECTIOR RAL, FL 33914 US e named entity submits this statement for t e of Florida.  RE:		
ATTN: BA CAPE CO The above n the Stat	IALINDA BLVD ND DIRECTIOR RAL, FL 33914 US e named entity submits this statement for t e of Florida.	Agent	Date
ATTN: BA CAPE CO The above n the Stat BIGNATU	IALINDA BLVD ND DIRECTIOR RAL, FL 33914 US e named entity submits this statement for t e of Florida.  RE:	Agent	
ATTN: BA CAPE CO The above n the Stat BIGNATU	IALINDA BLVD ND DIRECTIOR RAL, FL 33914 US e named entity submits this statement for the of Florida.  RE: Electronic Signature of Registered	Agent	Date
ATTN: BA CAPE CO The above In the State GIGNATU  DFFICER Italiame: Iddress:	IALINDA BLVD ND DIRECTIOR RAL, FL 33914 US e named entity submits this statement for the of Florida.  RE: Electronic Signature of Registered  S AND DIRECTORS:  D () Delete BROWN, RICHARD 3500 AGUALINDA BLVD	Agent  ADDITIONS/CHANGI  Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

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: MARK CAGLE MR 05/10/2008