

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000004578

**FILED**  
**Jul 30, 2011**  
**Secretary of State**

**Entity Name:** JACKSON HEIGHTS MIDDLE SCHOOL BAND BOOSTERS ASSOCIATION, INC.

**Current Principal Place of Business:**

141 ACADEMY AVE.  
OVIEDO, FL 32765

**New Principal Place of Business:**

**Current Mailing Address:**

141 ACADEMY AVE.  
OVIEDO, FL 32765

**New Mailing Address:**

**FEI Number:** 33-1178940

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROBERSON, TIFFANY  
603. LAKE CLAIRE CT  
OVIEDO, FL 32765 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  
Name: WILLIAMSON, JEREMY  
Address: 141 ACADEMY AVE.  
City-St-Zip: OVIEDO, FL 32765

Title: DP  
Name: ROBERSON, TIFFANY  
Address: 603 LAKE CLAIRE CT  
City-St-Zip: OVIEDO, FL 32765

Title: S  
Name: MCNAMARA, SUE  
Address: 141 ACADEMY AVE.  
City-St-Zip: OVIEDO, FL 32765

Title: T  
Name: BYINGTON, MARY  
Address: 461 VERACLIFF CT  
City-St-Zip: OVIEDO, FL 32765

I hereby 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 all other like empowered.

SIGNATURE: MICHELE BYINGTON

TS

07/30/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date