2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

May 07, 2007 8:00 am Secretary of State DOCUMENT # N06000005829 05-07-2007 90071 005 ****70.00 LYMAN HIGH SCHOOL BAND ASSOCIATION, INC. Principal Place of Business Mailing Address 40107446 865 S RONALD REAGAN BLVD. 865 S RONALD REAGAN BLVD. LONGWOOD, FL 32750 LONGWOOD, FL 32750 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02122007 Chg-NP CR2E037 (12/06) City & State City & State Applied For 72-1617700 Not Applicable Zip Country Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ROCHFORD, VICKY Street Address (P.O. Box Number is Not Acceptable) 510 BIANCA CT ALTAMONTE SPRINGS; FL 32701 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent SIGNATURE . Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2007 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE Delete THILE Change ☐ Addition HAYS, KAREN NAME NAME STREET ADDRESS 509 SAVONA CT. STREET ADDRESS CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32701 CITY-ST-ZIP Delete ☐ Chance ☐ Addition FULLER, KAREN NAME NAME STREET ADDRESS 420 TIMBER RIDGE DR. STREET ADDRESS CITY-ST-ZIP LONGWOOD, FL 32779 CITY-ST-ZIP TO (CHANGEOF TIME) ROCHFORD VICKY -> SAME ADDRESS TITLE Delete TITLE ROCHFORD, VICKY NAME NAME STREET ADDRESS 510 BIANCA CT. CITY-ST-7IP ALTAMONTE SPRINGS, FL 32701 CITY-ST-ZIP Delete TITLE DS TITLE ☐ Change Addition MARTINEZ, MIRTHA NAME NAME STREET ADDRESS 660 SWEETBRIAR BRANCH STREET ADDRESS LONGWOOD, FL 32750 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITEE ☐ Change **Addition** SILVIA MARCONI NAME 643 ARBUKLE CT. STREET ADDRESS STREET ADDRESS WINTER SPRINGS FL 32708 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED



May 1, 2007

Division of Corporations PO Box 1500 Tallahassee, FL 32302-1500

Re: 2007 Not-for-Profit Corporation Annual Report

Dear Sir or Madam,

I was unable to access the sunbiz.org website on both April 30 and today in order to file this report and pay online. And the phone system kept cutting off when I tried to get through to an examiner. I request that late charges not be applied to this filing.

This is our first annual report and I had a question I could not get answered before filing. As a school-based organization, our Board members/Directors officially change on May 30th at the close of our school and fiscal year. I was unclear about whether this report should state the current or incoming Board members/Directors for 2007-8, so I elected to state the incoming ones. If this is not correct, please contact me.

Thanks,

Vicky Rochford, Current Treasurer and Incoming President

Lyman High School Band Association, Inc.

510 Bianca Ct

Altamonte Springs, FL 32701

(407) 332-4722