

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005829

FILED
Feb 11, 2012
Secretary of State

Entity Name: LYMAN HIGH SCHOOL BAND ASSOCIATION, INC.

Current Principal Place of Business:

865 S RONALD REAGAN BLVD.
LONGWOOD, FL 32750

New Principal Place of Business:

Current Mailing Address:

865 S RONALD REAGAN BLVD.
LONGWOOD, FL 32750

New Mailing Address:

FEI Number: 72-1617700

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SHYROCK, SHARON
110 TANGERINE DRIVE
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

OWENS, ELLIE
541 WINDING CREEK PLACE
LONGWOOD, FL 32779 US

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: ELLIE OWENS

02/11/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: AVELLONE, TERRI
Address: 1026 EDMISTON PLACE
City-St-Zip: LONGWOOD, FL 32779

Title: V
Name: KUHN, SUSAN
Address: 127 TARRY TOWN TRAIL
City-St-Zip: LONGWOOD, FL 32750

Title: S
Name: LONG, KIM
Address: 1607 ORLANDO AVENUE
City-St-Zip: LONGWOOD, FL 32750

Title: T
Name: OWENS, ELLIE
Address: 541 WINDING CREEK PLACE
City-St-Zip: LONGWOOD, FL 32779

Title: D
Name: BILL, MUSE
Address: 865 S. RONALD REAGAN BLVD
City-St-Zip: LONGWOOD, FL 32750

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: ELLIE OWENS

T

02/11/2012

Electronic Signature of Signing Officer or Director

Date