2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006318

FILED Apr 30, 2007 Secretary of State

Entity Name: PRIDE OF THE WILDCATS BAND PARENTS ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 1131 NW 118TH AVE 214 SW 159 WAY PLANTATION, FL 33323 SUNRISE, FL 33326 **Current Mailing Address: New Mailing Address:** 1131 NW 118TH AVE PO BOX PLANTATION, FL 33323 551984 FT. LAUDERDALE, FL 33355 FEI Number: 20-5041525 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PARENTE, CARMINE DIAZ, CATHERINE L 214 ŚW 159 WAY 1131 NW 118TH AVE PLANTATION, FL 33323 SUNRISE, FL 33326 US 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: CATHERINE L. DIAZ 04/30/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete PARENTE, CARMINE PARENTE, CARMINE Name: Name: 1131 NW 118TH AVE Address: 1131 NW 118TH AVE Address: City-St-Zip: PLANTATION, FL 33323 City-St-Zip: PLANTATION, FL 33323 Title: Title: () Change (X) Addition () Delete Name: Name: REYNOLDS, KEVIN Address: Address: 9320 NW 14 STREET City-St-Zip: City-St-Zip: PEMBROKE PINES, FL 33324 Title: () Delete Title: **TREA** () Change (X) Addition DIAZ, CATHERINE L Name: Name: Address: Address: 214 SW 159 WAY City-St-Zip: City-St-Zip: SUNRISE, FL 33326 () Change (X) Addition Title: () Delete Title: SEC KORN, LORI Name: Name: 15865 WEST WIND Address: Address: City-St-Zip: City-St-Zip: SUNRISE, FL 33326

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: CATHERINE L. DIAZ **TREA** 04/30/2007