

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012761

FILED  
Mar 23, 2009  
Secretary of State

**Entity Name:** HINSON HURRICANES BAND BOOSTERS, INC.

**Current Principal Place of Business:**

DAVID HINSON MIDDLE SCHOOL  
1860 N CLYDE MORRIS BLVD  
DAYTONA BEACH, FL 32117

**New Principal Place of Business:**

**Current Mailing Address:**

POB 731234  
ORMOND BEACH, FL 321731234

**New Mailing Address:**

PO BOX 731234  
ORMOND BEACH, FL 32173

**FEI Number:** 14-1977660

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CLARK, ROCHELLE M  
1513 CULVER HOUSE DR  
DAYTONA BEACH, FL 32117 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: P ( ) Delete  
Name: DOLINER, BARBARA  
Address: 108 S ST ANDREWS  
City-St-Zip: ORMOND BEACH, FL 32174

Title: VP ( ) Delete  
Name: BROWN, WANDA  
Address: 4 SHELLY WAY  
City-St-Zip: ORMOND BEACH, FL 32174

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: LOCURTO, CAROLYN  
Address: 28 FOXFORDS CHASE  
City-St-Zip: ORMOND BEACH, FL 32174

Title: VP (X) Change ( ) Addition  
Name: GODBEE, ELLA  
Address: 31 FOXFORDS CHASE  
City-St-Zip: ORMOND BEACH, FL 32174

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: CAROLYN LOCUTO

P

03/23/2009

Electronic Signature of Signing Officer or Director

Date