

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000012761

**FILED**  
**Jan 16, 2010**  
**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:**

PO BOX 731234  
ORMOND BEACH, FL 32173

**New Mailing Address:**

**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  
Name: LOCURTO, CAROLYN  
Address: 28 FOXFORDS CHASE  
City-St-Zip: ORMOND BEACH, FL 32174

Title: VP  
Name: GODBEE, ELLA  
Address: 31 FOXFORDS CHASE  
City-St-Zip: ORMOND BEACH, FL 32174

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: CAROLYN LOCURTO

P

01/16/2010

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

\_\_\_\_\_  
Date