

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2008 8:00 am
Secretary of State

04-23-2008 90024 001 ****70.00

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1. Entity Name
BRONCO BAND PATRONS ASSOCIATION, INC.



Principal Place of Business

2351 SE 12TH AVE.
BAND ROOM
HOMESTEAD, FL 33034 US

Mailing Address

2351 SE 12TH AVE.
BAND ROOM
HOMESTEAD, FL 33035 US

40077800



DO NOT WRITE IN THIS SPACE

04092008 No Chg-NP CR2E037 (4/06)

4. FEI Number
59-2514976

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

DODSON, BARBARA
2351 SE 12 AVENUE
BAND ROOM
HOMESTEAD, FL 33033

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IN THIS SPACE**

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: Barbara Dodson

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/7/08

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	TD NEW →
NAME	CHERYL CLAYTON
STREET ADDRESS	2351 SE 12 AVE
CITY-ST-ZIP	HOMESTEAD, FL 33033
TITLE	SD NEW →
NAME	SHARON JACKSON
STREET ADDRESS	2351 SE 12 AVE
CITY-ST-ZIP	HOMESTEAD, FL 33033
TITLE	PD
NAME	BRIUN, LINDA
STREET ADDRESS	24342 SW 129 PLACE
CITY-ST-ZIP	HOMESTEAD, FL 33032
TITLE	VD
NAME	HAYNES, MICHAEL
STREET ADDRESS	27256 SW 124 CT
CITY-ST-ZIP	HOMESTEAD, FL 33032
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby 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.

SIGNATURE: Barbara Dodson BARBARA DODSON 4/7/08 305
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR TREASURER Date Daytime Phone #

I have enclosed a check for ATTACHMENT
which is \$6.25 plus 8.75 certificate. 40077800
I have also written in the new Board #NO 7658
members for the year 2008 (Aug) → (JUNE) 2009.
The new board will take over in August at
the beginning of the school year.

If any questions, please contact
me at 305-338-0431.

BARBARA Dodson

Treasurer 2007-2008
