

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07658

FILED  
Apr 04, 2009  
Secretary of State

**Entity Name:** BRONCO BAND PATRONS ASSOCIATION, INC.

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

**Current Mailing Address:**

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

**New Mailing Address:**

**FEI Number:** 59-2514976

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DODSON, BARBARA  
2351 SE 12 AVENUE  
BAND ROOM  
HOMESTEAD, FL 33033 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: TD ( ) Delete  
Name: CLAYTON, CHERYL  
Address: 2351 SE 12 AVE  
City-St-Zip: HOMESTEAD, FL 33038

Title: SD ( ) Delete  
Name: JACKSON, SHRARON  
Address: 2351 SE 12 AVE  
City-St-Zip: HOMESTEAD, FL 33034

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: BARBARA DODSON

MRS.

04/04/2009

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

\_\_\_\_\_  
Date