2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07768

FILED Jun 11, 2006 Secretary of State

Entity Name: FT. CLARKE MIDDLE SCHOOL BAND BOOSTERS, INC.

Current Principal Place of Business: New Principal Place of Business:

9301 N.W. 23 AVENUE GAINESVILLE, FL 32606

Current Mailing Address: New Mailing Address:

9301 N.W. 23 AVENUE GAINESVILLE, FL 32606

FEI Number: 07-0078100 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

LANCASTER, PHILIP STATE MATERIALS OFFICE 5007 NE 39 AVE GAINESVILLE, FL 32609 US SHAFER, CHARLOTTE T 5424 NW 69TH LANE GAINESVILLE, FL 32653 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: CHARLOTTE T. SHAFER 06/11/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 T
 () Delete
 Title:
 T
 (X) Change () Addition

 Name:
 WILSON, CHARLES
 Name:
 SHAFER, CHARLOTTE

 Address:
 1510 NW 107 TERR
 Address:
 5424 NW 69TH LANE

 Address:
 1510 NW 107 TERR
 Address:
 5424 NW 69TH LANE

 City-St-Zip:
 GAINESVILLE, FL 32606
 City-St-Zip:
 GAINESVILLE, FL 32653

Title: PD () Delete Title: PD (X) Change () Addition Name: LANCASTER, PHILIP Name: FRANK, JONATHAN

 Address:
 3323 NW 112TH ST
 Address:
 3628 NW 110TH TER

 City-St-Zip:
 GAINESVILLE, FL 32606
 City-St-Zip:
 GAINESVILLE, FL 32606

Title: SD (X) Delete Title: () Change () Addition

 Name:
 ROBERTS, SANDRA
 Name:

 Address:
 440 NW 18TH PLACE
 Address:

 City-St-Zip:
 GAINESVILLE, FL 32605
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: CHARLOTTE T. SHAFER T 06/11/2006