

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000008685

FILED
Aug 31, 2009
Secretary of State

Entity Name: BANDS AGAINST BREAST CANCER, INC.

Current Principal Place of Business:

1353 PINEWOOD ROAD
JACKSONVILLE, FL 32250

New Principal Place of Business:

Current Mailing Address:

1353 PINEWOOD ROAD
JACKSONVILLE, FL 32250

New Mailing Address:

FEI Number: 26-3374121 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

WATSON, HENRIETTA E
1353 PINEWOOD ROAD
JACKSONVILLE BEACH, FL 32250 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WATSON, HENRIETTA E
Address: 1353 PINEWOOD ROAD
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

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City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP () Change (X) Addition
Name: DELUCA, LISA
Address: 1800 THE GREENS WAY
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: S () Change (X) Addition
Name: MILLARD, JERI
Address: 175 ROSCOE BLVD N
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: T () Change (X) Addition
Name: MILLARD, MARTY
Address: 175 ROSCOE BLVD N
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D () Change (X) Addition
Name: HRIVNAK, BARBARA
Address: 563 CHARLES PICKNEY ST
City-St-Zip: ORANGE PARK, FL 32073

Title: D () Change (X) Addition
Name: LYNCH, NICOLA
Address: 326 6TH ST N
City-St-Zip: JACKSONVILLE BEACH, FL 32250

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: HENRIETTA E WATSON

P

08/31/2009

Electronic Signature of Signing Officer or Director

Date