2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2009
Secretary of State

DOCUMENT# N08000010825

Entity Name: WILDWOOD BAND BOOSTERS, INC.

Current Principal Place of Business:

4448 E COUNTY RD 468
WILDWOOD, FL 34785

New Principal Place of Business:

Current Mailing Address:

MR. CHRIS EDWARDS
4448 E COUNTY ROAD 468
WILDWOOD, FL 34785

New Mailing Address:

4448 E COUNTY RD 468
WILDWOOD, FL 34785

FEI Number: 26-2993177 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EDWARDS, CHRIS
4448 E COUNTY RD 468
WILDWOOD, FL 34785 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: DP ( ) Delete
Name: EDWARDS, CHRIS
Address: 4448 E COUNTY RD 468
City-St-Zip: WILDWOOD, FL 34785

Title: DVP ( ) Delete
Name: EDWARDS, MARLENE
Address: 4448 E COUNTY RD 468
City-St-Zip: WILDWOOD, FL 34785

Title: DS (X) Delete
Name: SANTOS, JANET
Address: 10220 COUNTY ROAD 223
City-St-Zip: OXFORD, FL 34484

Title: DT ( ) Delete
Name: BURR, RICHARD
Address: 28 SEMINOLE PATH
City-St-Zip: WILDWOOD, FL 34785

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DVPS (X) Change ( ) Addition
Name: EDWARDS, MARLENE
Address: 4448 E COUNTY RD 468
City-St-Zip: WILDWOOD, FL 34785

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: CHRIS EDWARDS DP 04/22/2009

Electronic Signature of Signing Officer or Director — Date