

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jan 28, 2011
Secretary of State

DOCUMENT# N09000008414

Entity Name: HHS BAND BOOSTERS, INC.**Current Principal Place of Business:**5000 CENTRAL AVENUE
TAMPA, FL 33603**New Principal Place of Business:****Current Mailing Address:**5000 CENTRAL AVENUE
TAMPA, FL 33603**New Mailing Address:****FEI Number:** 27-0815247**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MIEDER, KIMBERLY
5000 CENTRAL AVENUE
TAMPA, FL 33603 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: D
Name: MIEDER, KIMBERLY
Address: 5000 CENTRAL AVENUE
City-St-Zip: TAMPA, FL 33603

Title: DP
Name: VALENTI, MARGO
Address: 5000 CENTRAL AVENUE
City-St-Zip: TAMPA, FL 33603

Title: D
Name: ORR, WILLIAM DR.
Address: 5000 CENTRAL AVENUE
City-St-Zip: TAMPA, FL 33603

Title: VP
Name: CORRAO, LISA
Address: 5000 CENTRAL AVENUE
City-St-Zip: TAMPA, FL 33603

Title: T
Name: IZZIARY, ANNIE
Address: 5000 CENTRAL AVENUE
City-St-Zip: TAMPA, FL 33603

Title: S
Name: IDZIAK, CINDY
Address: 5000 CENTRAL AVENUE
City-St-Zip: TAMPA, FL 33603

I hereby 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 all other like empowered.

SIGNATURE: MARGO T. VALENTI

P

01/28/2011

Electronic Signature of Signing Officer or Director

Date