

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17903

FILED
Jan 27, 2009
Secretary of State

Entity Name: HOWARD BISHOP MIDDLE SCHOOL PARENT BAND BOOSTERS, INC.

Current Principal Place of Business:

1901 N.E. 9TH ST.
GAINESVILLE, FL 326093736

New Principal Place of Business:

Current Mailing Address:

1901 N.E. 9TH ST.
GAINESVILLE, FL 326093736

New Mailing Address:

FEI Number: 59-2745476

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CULLEN, STUART
3530 NW 43RD STREET
GAINESVILLE, FL 32606 US

Name and Address of New Registered Agent:

CARNES, BETSY
1901 NE 9TH STREET
GAINESVILLE, FL 32609 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: BETSY CARNES

01/27/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LAVAY, KATHY
Address: 2646 NW 51ST PLACE
City-St-Zip: GAINESVILLE, FL 32605

Title: TD () Delete
Name: CULLEN, STUART
Address: 3213 SW 125TH STREET
City-St-Zip: ARCHER, FL 32618

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TD (X) Change () Addition
Name: CARNES, BETSY
Address: 1901 NE 9TH STREET
City-St-Zip: GAINESVILLE, FL 32609

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: BETSY CARNES

TD

01/27/2009

Electronic Signature of Signing Officer or Director

Date