

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21729

FILED
Mar 06, 2008
Secretary of State

Entity Name: FLORIDA BANDMASTERS ASSOCIATION, INCORPORATED

Current Principal Place of Business:

C/O DUANE L HENDON
11951 NE 52ND PLACE RD
SILVER SPRINGS, FL 34488 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1028
SILVER SPRINGS, FL 344891028 US

New Mailing Address:

FEI Number: 59-2318742

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENDON, DUANE L
11951 NE 52ND PLACE RD
SILVER SPRINGS, FL 34488 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: P () Delete
Name: FULTON, CHARLES
Address: 619 SOMERSET LOOP
City-St-Zip: AUBURNDALE, FL 33823

Title: PP () Delete
Name: THORNTON, PAULA
Address: 4842 NW 28TH PL
City-St-Zip: GAINESVILLE, FL 32606

Title: PE () Delete
Name: SPREEN, MARK
Address: 4844 MARGOLD PL
City-St-Zip: SARASOTA, FL 34231

Title: ED () Delete
Name: HENDON, DUANE L
Address: 11951 NE 52ND PLACE RD
City-St-Zip: SILVER SPRINGS, FL 34488

Title: D () Delete
Name: BIRDWELL, JAMIE
Address: 170 DERBY WOODS DRIVE
City-St-Zip: LYNN HAVEN, FL 32444

Title: D () Delete
Name: BULA, JOSH
Address: 2104 BULLOCKS RUN RD
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PP (X) Change () Addition
Name: THORNTON, PAULA
Address: 3851 LIONHEART DRIVE
City-St-Zip: JACKSONVILLE, FL 32216

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

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

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: DUANE L. HENDON

ED

03/06/2008

Electronic Signature of Signing Officer or Director

Date