2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2008 8:00 am
Secretary of State
03-10-2008 90067 028 ****61.25

DOCUMENT # N23070

1. Entity Name
BEARCAT BAND BOOSTERS, INC.

Principal Place of Business	Mailing Address
344 NE CRYSTAL ST CRYSTAL RIVER, FL 34428 US	PO BOX 2204 CRYSTAL RIVER, FL 34423 US

4UU42U21

03042008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 31-1513085 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SCHLUMBERGER, ROBERT
6220 W CORPORATE OAKS DR
CRYSTAL RIVER, FL 34429-8723

7. Name and Address of New Registered Agent

Name Holly R. Elpers
Street Address (P.O. Box Number is Not Acceptable) 344 NE Crystal St
City Crystal River FL Zip Code 34428

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Holly R. Elpers Holly R. Elpers Treasurer 3/4/08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD KUHLMAN, WENDIE P.O. BOX 2204 CRYSTAL RIVER, FL 34423	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Brenda Campellone - Pres ~~4476 W. Fish Cove~~ PO Box 2204 Crystal River FL 34423	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V ELPERS, HOLLY P.O. BOX 2204 CRYSTAL RIVER, FL 34423	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SMALL, MELISSA P.O. BOX 2204 CRYSTAL RIVER, FL 34423	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD DAVIS, GINA PO BOX 2204 CRYSTAL RIVER, FL 34423	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Fawn Phipps - Vice Pres PO Box 2204 Crystal River, FL 34423	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD HARVEY, MAE FIN PO BOX 2204 CRYSTAL RIVER, FL 34423	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Terri Simon - Corr Sec. PO Box 2204 Crystal River, FL 34423	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD HARVEY, RUSSEL PO BOX 2204 CRYSTAL RIVER, FL 34423	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Holly R. Elpers Holly R. Elpers Treasurer 3/4/08 352 564 8533
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #