

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27109

FILED  
May 03, 2008  
Secretary of State

Entity Name: PINE FOREST BAND BOOSTERS, INC.

**Current Principal Place of Business:**

2500 LONG LEAF DR.  
PENSACOLA, FL 32526

**New Principal Place of Business:**

**Current Mailing Address:**

2500 LONG LEAF DR.  
PENSACOLA, FL 32526

**New Mailing Address:**

FEI Number: 59-2899633      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

KROSTAG, PETER  
BAND DIRECTOR, PINE FOREST HIGH SCHOOL  
2500 LONG LEAF DRIVE  
PENSACOLA, FL 32526 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: O'NEAL, THOMAS  
Address: 6698 HALLENDALE DRIVE  
City-St-Zip: PENSACOLA, FL 32526

Title: VP ( ) Delete  
Name: TAYLOR, EUGENIA  
Address: 2500 LONGLEAF DR  
City-St-Zip: PENSACOLA, FL 32526

Title: SEC ( ) Delete  
Name: HODGES, CHRISTINE  
Address: 2500 LONGLEAF DR.  
City-St-Zip: PENSACOLA, FL 32526

Title: TREA (X) Delete  
Name: HOLT, SUSAN  
Address: 1110 WEBSTER DR  
City-St-Zip: PENSACOLA, FL 32505

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: TAYLOR, GENIA  
Address: 1531 TWIN PINES CIRCLE  
City-St-Zip: CANTONMENT, FL 32533

Title: VP (X) Change ( ) Addition  
Name: MOORE, LINDA  
Address: 2500 LONGLEAF DR  
City-St-Zip: PENSACOLA, FL 32526

Title: TREA (X) Change ( ) Addition  
Name: HOLT, SUSAN  
Address: 1110 WEBSTER DR  
City-St-Zip: PENSACOLA, FL 32505

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: SUSAN R. HOLT

TREA

05/03/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date