

FILE NOW: FILING FEE IS \$61.25

FILED

Apr 09 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # **N27654** (5)

1. Corporation Name

MARINER HIGH SCHOOL BAND BOOSTERS, INC.

Principal Place of Business

Mailing Address

PO BOX 151042
CAPE CORAL FL 33990-3905

PO BOX 151042
CAPE CORAL FL 33990-3905
US



3. Date Incorporated or Qualified

07/28/1988

4. FEI Number

59-0155622

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24 **33915**

25

29 **33915**

30

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐

\$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No

8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LOWENDICK, H. D
1505 WEST EL DORADO PKWY
CAPE CORAL FL 33991

81 Name **Sharon P. Lowendick**

82 Street Address (P.O. Box Number is Not Acceptable)
1505 W EL Dorado Pkwy

83

84 City **Cape Coral** **FL** 85 Zip Code **33991**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept, the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE **Sharon P. Lowendick**

SHARON P Lowendick

4/1/98

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☒ DELETE
NAME **LOWENDICK, H. D**
STREET ADDRESS **1505 E. EL DORADO PKWY**
CITY-ST-ZIP **CAPE CORAL FL**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME **Lowendick, Sharon**
1.3 STREET ADDRESS **1505 E. EL DORADO PKWY**
1.4 CITY-ST-ZIP **Cape Coral, FL 33991**

TITLE **VPD** ☒ DELETE
NAME **CARTER, BILL**
STREET ADDRESS **1042 NW 39 AVE**
CITY-ST-ZIP **CAPE CORAL FL 33909**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE **PD** ☒ DELETE
NAME **SERENA, PATRICIA**
STREET ADDRESS **5598 JUDITH ROAD**
CITY-ST-ZIP **CAPE CORAL FL**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE **VPD** ☒ DELETE
NAME **CARTER, BILL**
STREET ADDRESS **1042 NW 39TH AVENUE**
CITY-ST-ZIP **CAPE CORAL FL**

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME **Sharon Obney**
4.3 STREET ADDRESS **1030 NE 8th Pl**
4.4 CITY-ST-ZIP **Cape Coral, FL 33915**

TITLE **SD** ☒ DELETE
NAME **OBNEY, SHARON**
STREET ADDRESS **1030 NE 8TH PLACE**
CITY-ST-ZIP **CAPE CORAL FL**

5.1 TITLE ☐ Change ☒ Addition
5.2 NAME **Sharon K Lowy-Alice**
5.3 STREET ADDRESS **404 SW 39th St**
5.4 CITY-ST-ZIP **Cape Coral FL 33914-5458**

TITLE **TD** ☒ DELETE
NAME **LOWENDICK, H. D.**
STREET ADDRESS **1505 E EL DORADO PARKWAY**
CITY-ST-ZIP **CAPE CORAL FL**

6.1 TITLE ☐ Change ☒ Addition
6.2 NAME **SUSAN C Pollard**
6.3 STREET ADDRESS **5005 SW 9th Pl**
6.4 CITY-ST-ZIP **CAPE CORAL, FL 33914**

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Susan C Pollard**

3-9-98

CR2E037 (10/97)