2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29515

FILED Aug 23, 2008 Secretary of State

Entity Name: DUNEDIN HIGHLAND MIDDLE SCHOOL BAND BOOSTER ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

70 PATRICIA AVE DUNEDIN, FL 34698

Current Mailing Address: New Mailing Address:

70 PATRICIA AVE DUNEDIN, FL 34698

FEI Number: 59-6000799 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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:

BURTON, MARILYN A
969 CEDARWOOD DRIVE
DUNEDIN, FL 34698 US
GOW, CARIN LINDSEY
1140 MARY JANE LANE
DUNEDIN, FL 34698 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: CARIN LINDSEY GOW 08/23/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: T () Delete Title: T (X) Change () Addition

 Name:
 SUMNER, BRENDA
 Name:
 GOW, CARIN LINDSEY

 Address:
 2287 WILSHIRE DR.
 Address:
 1140 MARY JANE LANE

 City-St-Zip:
 DUNEDIN, FL 34698
 City-St-Zip:
 DUNEDIN, FL 34698

Title: S () Delete Title: S (X) Change () Addition Name: HOUSE, LORA Name: WHITLEY, SARAH

Address: 1540 SAN DIEGO DR Address: 1923 BRAE MOOR DRIVE
City-St-Zip: DUNEDIN, FL 34698 City-St-Zip: DUNEDIN, FL 34698

Title: P () Delete Title: P (X) Change () Addition Name: BURTON, MARILYN Name: KEITH, JENNY

Address: 969 CEDARWOOD DR Address: 1090 FOX HOLLOW RUN

City-St-Zip: DUNEDIN, FL 34698 City-St-Zip: DUNEDIN, FL 34698

 $\label{eq:title: VP (X) Change () Addition} \begin{picture} Title: & VP & (X) Change () Addition \\ \end{picture}$

 Name:
 PIEHL, ADRIANNE
 Name:
 KING, LESLIE HELMER

 Address:
 3177 SHARPE LN
 Address:
 1472 PATRICIA AVENUE

 City-St-Zip:
 DUNEDIN, FL 34698
 City-St-Zip:
 DUNEDIN, FL 34698

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: CARIN LINDSEY GOW T 08/23/2008