2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Aug 16, 2009
Secretary of State

DOCUMENT# N29515

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

Current Principal Place of Business:

70 PATRICIA AVE
DUNEDIN, FL 34698

New Principal Place of Business:

Current Mailing Address:

70 PATRICIA AVE
DUNEDIN, FL 34698

New Mailing Address:

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

Name and Address of Current Registered Agent:

GOW, CARIN LINDSEY
1140 MARY JANE LANE
DUNEDIN, FL 34698 US

Name and Address of New Registered Agent:

GOW, CARIN LINDSEY
1140 MARY JANE LANE
DUNEDIN, FL 346983507 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 08/16/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: T ( ) Delete
Name: GOW, CARIN LINDSEY
Address: 1140 MARY JANE LANE
City-St-Zip: DUNEDIN, FL 34698

Title: S ( ) Delete
Name: WHITLEY, SARAH
Address: 1923 BRAE MOOR DRIVE
City-St-Zip: DUNEDIN, FL 34698

Title: P ( ) Delete
Name: KEITH, JENNY
Address: 1631 DALE CIRCLE N.
City-St-Zip: DUNEDIN, FL 34698

Title: VP ( ) Delete
Name: KING, LESLIE HELMER
Address: 1472 PATRICIA AVENUE
City-St-Zip: DUNEDIN, FL 34698

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: GOW, CARIN LINDSEY
Address: 1140 MARY JANE LANE
City-St-Zip: DUNEDIN, FL 346983507

Title: VP (X) Change ( ) Addition
Name: FRIEND, NANNETTE
Address: 725 KIRKLAND CIRCLE
City-St-Zip: DUNEDIN, FL 346987308

Title: T (X) Change ( ) Addition
Name: EHMIG, TAMI
Address: 1070 ROBMAR ROAD
City-St-Zip: DUNEDIN, FL 346983513

Title: S (X) Change ( ) Addition
Name: RUSAW, DENISE
Address: 1931 JUNE BELLS DRIVE
City-St-Zip: CLEARWATER, FL 337551621

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 P 08/16/2009
Electronic Signature of Signing Officer or Director Date