

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29662

FILED  
Jul 27, 2012  
Secretary of State

**Entity Name:** BOCA CIEGA HIGH SCHOOL BAND BOOSTERS, INC.

**Current Principal Place of Business:**

924 - 58TH STREET S.  
GULFPORT, FL 33707 US

**New Principal Place of Business:**

**Current Mailing Address:**

924 - 58TH STREET S.  
GULFPORT, FL 33707 US

**New Mailing Address:**

**FEI Number:** 59-2923959

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

YEAZELL, MARINA K  
7618 DARTMOUTH AV N  
ST. PETERSBURG, FL 33710 US

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

CARTER, DAWN  
5245 34TH AV N  
ST. PETERSBURG, FL 33710 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:** DAWN CARTER

07/27/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** TO  
**Name:** GRAHAM, PATRICIA A  
**Address:** 6049 32ND ST N  
**City-St-Zip:** SAINT PETERSBURG, FL 33714 US

**Title:** PO  
**Name:** CARTER, DAWN  
**Address:** 5245 34TH AV N  
**City-St-Zip:** ST PETERSBURG, FL 33710 US

**Title:** VPO  
**Name:** GUNTER-MOYERS, KIM  
**Address:** 2995 67TH WAY N  
**City-St-Zip:** ST. PETERSBURG, FL 33710 US

**Title:** SO  
**Name:** MCCOY, NATALIE  
**Address:** 1885 SHORE DR S  
**City-St-Zip:** SOUTH PASADENA, FL 33707 US

**Title:** CCL  
**Name:** ALLEN, CHRISTINA P  
**Address:** 949 57TH AV N  
**City-St-Zip:** ST PETERSBURG, FL 33703 US

**Title:** CCL  
**Name:** MOYER, TOM  
**Address:** 2995 67TH WAY NORTH  
**City-St-Zip:** ST PETERSBURG, FL 33710 US

I hereby 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 all other like empowered.

**SIGNATURE:** DAWN CARTER

PO

07/27/2012

Electronic Signature of Signing Officer or Director

Date