2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30403

FILED Jul 26, 2006 Secretary of State

Entity Name: TAVARES BAND BOOSTERS, INC.

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

% BAND DIRECTOR 603 N NEW HAMPSHIRE AVE TAVARES, FL 32778

Current Mailing Address: New Mailing Address:

% BAND DIRECTOR P.O. BOX 1363 TAVARES, FL 32778 US

FEI Number: 65-0101585 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:

VENEZIO, ALLEN J 603 NORTH NEW HAMPSHIRE TAVARES, FL 32778 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:

Flatherin Circular of Davidson I Anna

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD () Delete Title: PD (X) Change () Addition Name: HOAGLAND, TAMMY Name: MINKOFF, SANFORD A Address: 11342 LOCKWOOD STREET Address: 15800 ACORN CIRCLE

City-St-Zip: LEESBURG, FL City-St-Zip: TAVARES, FL 32778

Title: PD () Delete Title: VPD (X) Change () Addition Name: STRICKLAND, MONICA Name: ADAMS, REBECCA

Address: 10844 ANNA BELLE AVENUE Address: 33231 LAKE BEND CIRCLE City-St-Zip: LEESBURG, FL 34788 City-St-Zip: LEESBURG, FL 34788

Title: SD () Delete Title: SD (X) Change () Addition Name: O'STEEN, DEBBIE Name: LEE, JAN

 Address:
 34308 OAK AVENUE
 Address:
 23335 OAK LANE

 City-St-Zip:
 LEESBURG, FL 34788
 City-St-Zip:
 SORRENTO, FL 32776

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

 Name:
 LUPTON, AMY
 Name:
 MINKOFF, BARBARA L

 Address:
 1616 N. NEW HAMPSHIRE AVE
 Address:
 15800 ACORN CIRCLE

 City-St-Zip:
 TAVARES, FL 32778
 City-St-Zip:
 TAVARES, FL 32778

Name: MARTIN, KAREN Name: LUPTON, AMY

Address: 11000 RIVERSIDE ROAD Address: 1616 N NEW HAMPSHIRE AVE

City-St-Zip: LEESBURG, FL City-St-Zip: TAVARES, FL 32778

I hereby certify that the information supplied with this filing does not qualify for the 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: BARBARA LEHMAN MINKOFF T 07/26/2006