2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32401

FILED Jaņ 16, 2<u>00</u>9 Secretary of State

Entity Name: TITUSVILLE HIGH SCHOOL INSTRUMENTAL MUSIC BOOSTERS, INC.

Current Principal Place of Business:

New Principal Place of Business:

TITUSVILLE HIGH SCHOOL (ATTN: IB=MB) 150 SOUTH TERRIER TRAIL

TITUSVILLE, FL 327832300 US

Current Mailing Address:

New Mailing Address:

THS INSTRUMENTAL MUSIC BOOSTERS P.O. BOX 2125 TITUSVILLE, FL 32780 US

FEI Number: 59-2954792 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DELGADO, BETH

COX, DEBBIE 3665 HICKÓRY PARK DRIVE 2895 LIBERTY AVENUE TITUSVILLE, FL 32780 TITUSVILLE, FL 32780 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: COX, DEBBIE 01/16/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

DELGADO, BETH COX. DEBBIE Name: Name: 3665 HICKORY PARK DRIVE Address: 2895 LIBERTY AVENUE Address: City-St-Zip: TITUSVILLE, FL 32780 City-St-Zip: TITUSVILLE, FL 32780

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

SZCZERBA, YVONNE BALL, LINDA Name: Name: Address: 2400 KEISER CT Address: 2560 WHITE OAK LANE City-St-Zip: TITUSVILLE, FL 32780 City-St-Zip: TITUSVILLE, FL 32780

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

PETYK, DEBBIE FREEN, MARY Name: Name: 1237 LITTLE OAK CIR 3835 LOST TREE COURT Address: Address:

City-St-Zip: TITUSVILLE, FL 32780 City-St-Zip: TITUSVILLE, FL 32796

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

Name: BREZSKI, TERI Name: BAKER-HORNER, PERRI Address: 4171 HEMLOCK LANE Address: 1432 FERRIER DRIVE City-St-Zip: TITUSVILLE, FL 32780 City-St-Zip: TITUSVILLE, FL 32780

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: DEBBIE COX DT 01/16/2009

Electronic Signature of Signing Officer or Director

Date