

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N33938

1. Entity Name

PLANT CITY HIGH SCHOOL BAND PARENTS ASSOCIATION
A FLORIDA NONPROFIT CORPORATION

Principal Place of Business

Mailing Address

1 RAIDER PLACE
PLANT CITY FL 33568

P.O. BOX 1957
PLANT CITY FL 33564-1957
US

2. Principal Place of Business

1 RAIDER PLACE

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 1957

Suite, Apt. #, etc.

37343



DO NOT WRITE IN THIS SPACE

City & State

PLANT City, FL

City & State

PLANT City, FL

4. FEI Number

NOT APPLICABLE

Applied For

☒ Not Applicable

Zip

33567

Country

Hillsborough

Zip

33564-1957

Country

Hillsborough

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MURPHY, DEBRA
1208 S. WIGGINS RD.
PLANT CITY FL 33568

7. Name and Address of New Registered Agent

Name JAMES CAUSEY JR.
Street Address (P.O. Box Number is Not Acceptable)
3307 DENTON Rd.

City PLANT City

FL

Zip Code

33566

8. 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

James E. Causey, Jr. James E. Causey, Jr. President
Debra Murphy Debra Murphy, Treasurer

Signature, typed or printed name of registered agent and title, applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

6/27/02

4/23/02

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE VD
NAME NOLL, JANE A
STREET ADDRESS 3217 STEVENSON CT
CITY-ST-ZIP PLANT CITY FL 33567 ☒ Delete

TITLE SD
NAME MANUS, TINA
STREET ADDRESS 4804 COUNTRY HILLS CT. N.
CITY-ST-ZIP PLANT CITY FL 33567 ☐ Delete

TITLE VD
NAME LANE, ROBERT
STREET ADDRESS 1008 MONROE ST.
CITY-ST-ZIP PLANT CITY FL 33568 ☐ Delete

TITLE TD
NAME MURPHY, DEBRA
STREET ADDRESS 1208 S WIGGINS RD
CITY-ST-ZIP PLANT CITY FL 33568 ☒ Delete

TITLE PD
NAME LANGSTON, TAMALA
STREET ADDRESS 609 ELMOR ST.
CITY-ST-ZIP PLANT CITY FL 33567 ☒ Delete

TITLE CD
NAME GREEN, MATTHEW
STREET ADDRESS 140 TOM CARR LANE
CITY-ST-ZIP LITHIA FL 33547 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VICE PRESIDENT
NAME DOUGLAS DYKEMA
STREET ADDRESS 3012 FOREST CLUB DR
CITY-ST-ZIP PLANT City, FL 33567 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE TREASURER
NAME JUDY GARRELL
STREET ADDRESS 301 Wilder Rd. Lot 74
CITY-ST-ZIP PLANT City, FL 33566 ☒ Change ☐ Addition

TITLE President
NAME James Causey Jr
STREET ADDRESS 3307 DENTON Rd
CITY-ST-ZIP PLANT City, FL 33566 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED James Causey Jr
PRESIDENT

4/23/02

813-299-8874

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)