

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33938

FILED
Apr 26, 2005
Secretary of State

Entity Name: PLANT CITY HIGH SCHOOL BAND PARENTS ASSOCIATION A FLORIDA NONPROFIT CORPORATION

Current Principal Place of Business:

1 RAIDER PLACE
PLANT CITY, FL 33566

New Principal Place of Business:

Current Mailing Address:

P.O BOX 1957
PLANT CITY, FL 335641957 US

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RESCHKE, KAREN M
3470 SILVERSTONE CT
PLANT CITY, FL 33566 US

Name and Address of New Registered Agent:

CRAWFORD, BRIAN
P.O. BOX 1957
PLANT CITY, FL 33564 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: BRIAN CRAWFORD

04/26/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: GARRELL, JUDY
Address: 301 WILDER RD LOT 74
City-St-Zip: PLANT CITY, FL 3356

Title: S () Delete
Name: PEACOCK, RONALD M
Address: 6501 STAFFORD RD
City-St-Zip: PLANT CITY, FL 33565

Title: VP () Delete
Name: ROBERTS, DAN
Address: 1813 SINOPOLI RD
City-St-Zip: PLANT CITY, FL 33565

Title: T () Delete
Name: CASTAGNO, JOE
Address: 2003 COUNTRY CL UB CT
City-St-Zip: PLANT CITY, FL 33566

Title: P (X) Delete
Name: RESCHKE, KAREN M
Address: 3470 SILVERSTONE CT
City-St-Zip: PLANT CITY, FL 33566

Title: CD (X) Delete
Name: GREEN, MATTHEW
Address: 5810 HARVEY TEW RD
City-St-Zip: PLANT CITY, FL 33565

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: RODENMEY, DALE
Address: P.O. BOX 1957
City-St-Zip: PLANT CITY, FL 33564

Title: SECY (X) Change () Addition
Name: KIFFNER, HEATHER
Address: P.O. BOX 1957
City-St-Zip: PLANT CITY, FL 33564

Title: VP (X) Change () Addition
Name: NAPIER, MELLISSA
Address: PO BOX 1957
City-St-Zip: PLANT CITY, FL 33564

Title: TREA (X) Change () Addition
Name: CASTAGNO, JOSEPH
Address: P.O. BOX 1957
City-St-Zip: PLANT CITY, FL 33564

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JOSEPH CASTAGNO

TREA

04/26/2005

Electronic Signature of Signing Officer or Director

Date