2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 27, 2008
Secretary of State

DOCUMENT# N50547

Entity Name: ESCAMBIA HIGH SCHOOL BAND BOOSTERS, INC.

Current Principal Place of Business:

ESCAMBIA HIGH SCHOOL
1310 65TH AVE.
PENSACOLA, FL 32506

New Principal Place of Business:

Current Mailing Address:

ESCAMBIA HIGH SCHOOL
1310 65TH AVE.
PENSACOLA, FL 32506

New Mailing Address:

FEI Number: 59-2348223 **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:

HOLSWORTH, DOUGLAS
1310 65TH AVE.
PENSACOLA, FL 32506 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: TD ( ) Delete
Name: SHUGART, DEBRA
Address: 515 N. 70TH AVENUE
City-St-Zip: PENSACOLA, FL 32506

Title: PD (X) Delete
Name: HARVEY, MARI
Address: 12166 GULF BEACH HWY.
City-St-Zip: PENSACOLA, FL 32507

Title: VD ( ) Delete
Name: CROWE, NINA
Address: 10745 JOLYNE DR.
City-St-Zip: PENSACOLA, FL 32506

Title: SD (X) Delete
Name: HOGUE, GAIL
Address: 1538 SANDCLIFF DR.
City-St-Zip: PENSACOLA, FL 32507

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VD (X) Change ( ) Addition
Name: CROWE, REINA
Address: 10745 JOLYNE DR.
City-St-Zip: PENSACOLA, FL 32506

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

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: DEBRA D SHUGART TD 05/27/2008

Electronic Signature of Signing Officer or Director Date