

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51182

FILED
Apr 29, 2009
Secretary of State

Entity Name: DIXIE HOLLINS BAND BOOSTERS, INC.

Current Principal Place of Business:

4940 - 62 STREET N.
ST. PETERSBURG, FL 33709

New Principal Place of Business:

Current Mailing Address:

4940 - 62 STREET N.
ST. PETERSBURG, FL 33709

New Mailing Address:

FEI Number: 59-6612116 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATKINS, JANICE
3521 74TH ST N
SAINT PETERSBURG, FL 33710 US

Name and Address of New Registered Agent:

COMUNTZIS, HOPE
6140 39TH AVE N
SAINT PETERSBURG, FL 33709 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: HOPE COMUNTZIS

04/29/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: COMUNTZIS, HOPE
Address: 6140 39TH AVE N
City-St-Zip: ST PETERSBURG, FL 33709

Title: TD () Delete
Name: WATKINS, JANICE
Address: 3521 74TH ST N
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: SD () Delete
Name: ENGALA, CHERI
Address: 2858 15TH AVE N.
City-St-Zip: SAINT PETERSBURG, FL 33713

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TD (X) Change () Addition
Name: LENHART, KELLY
Address: 851 52ND AVE N
City-St-Zip: SAINT PETERSBURG, FL 33703

Title: SD (X) Change () Addition
Name: SMITH, MARJORIE
Address: 5001 46TH AVE N
City-St-Zip: SAINT PETERSBURG, FL 33709

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: HOPE COMUNTZIS

P

04/29/2009

Electronic Signature of Signing Officer or Director

Date