## 2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## EPDVNFOU!\$ N93000004615

COOPER CITY HIGH SCHOOL BAND PARENTS' ASSOCIATION, INC.

Principal Place of Business

9401 STIRLING RD COOPER CITY, FL 33328

BURCH, TRACIE

9401 STIRLING RD COOPER CITY, FL 33328 Mailing Address

9401 STIRLING RD COOPER CITY, FL 33328

## **FILED** Feb 02, 2007 08:00 AM **Secretary of State**



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DS3F148 )5017\*

5/ FEI Number 59-2583208 Applied For Not Applicable

6/ Certificate of Status Desired

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9/ 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE					
	Filing Fee is \$61.25 Due by May 1, 2007	: / Election Campaign Finand Trust Fund Contribution.	cing	%6/11 NbziCri BeefeluplGrft	
21/	OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MOON, JAMES 9401 STIRLING RD COOPER CITY, FL 33328				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD WHITFORD, ARNOLD 9401 STIRLING RD COOPER CITY, FL 33328				000000619259 02/08/07-80064-007 70.00
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	VPD IZQUIERDO, YANI 9401 STIRLING RD COOPER CITY, FL 33328			EP	OPU X SJJF!
TITLE NAME Street address City-St-Zip	TD BURCH, TRACIE 9401 STIRLING RD COOPER CITY, FL 33328			a c	UI JT TOBDF
TITLE NAME	SD BELLO, LEAH				

23/ I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in the corporation of 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 in the corporation of 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 in the corporation of 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 in the corporation of 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 in the corporation of the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes.

TJHOBUVSF:

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-7IP

9401 STIRLING RD

COOPER CITY, FL 33328