

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
May 15, 2012
Secretary of State**

DOCUMENT# N93000004615

Entity Name: COOPER CITY HIGH SCHOOL BAND PARENTS' ASSOCIATION, INC.**Current Principal Place of Business:**9401 STIRLING RD
COOPER CITY, FL 33328**New Principal Place of Business:****Current Mailing Address:**PO BOX 848635
PEMBROKE PINES, FL 33084**New Mailing Address:****FEI Number:** 59-2583208**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SCHLETTER, CHRISTOPHER J
9401 STIRLING RD
COOPER CITY, FL 33328 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: PD
Name: DORON, ELIZABETH A
Address: 9401 STIRLING ROAD
City-St-Zip: COOPER CITY, FL 33328

Title: VPD
Name: SHLIMOWITZ, MICHEL
Address: 9401 STIRLING ROAD
City-St-Zip: COOPER CITY, FL 33328

Title: VPD
Name: FISHER, SUZI
Address: 9401 STIRLING RD
City-St-Zip: COOPER CITY, FL 33328

Title: TD
Name: SANTIAGO, MACHELLE
Address: 9401 STIRLING ROAD
City-St-Zip: COOPER CITY, FL 33328

Title: SD
Name: WEIN, LEE
Address: 9401 STIRLING ROAD
City-St-Zip: COOPER CITY, FL 33328

I hereby 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 all other like empowered.

SIGNATURE: MACHELLE SANTIAGO

TD

05/15/2012

Electronic Signature of Signing Officer or Director

Date