2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004902

City-St-Zip:

SEBRING, FL 33870

Entity Name: SEBRING BAND BOOSTER'S ASSOCIATION, INC.

FILED May 28, 2009 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	New Principal Place of Business:	
3514 KEN	HIGH SCHOOL ILWORTH BLVD FL 33870 US			
Current Mailing Address:		New Mailing Address:	New Mailing Address:	
P O BOX 3 SEBRING,	3513 FL 33871 US			
n accordan	: 65-0461519 FEI Number Applied For () ce with s. 607.193(2)(b), F.S., the corporation did	not receive the prior notice.	f Status Desired ()	
lame and	Address of Current Registered Agent:	Name and Address of New Registe	ered Agent:	
129 S. CO	JM, JAMES F MMERCE AVE. FL 33870 US			
	named entity submits this statement for the e of Florida.	purpose of changing its registered office or regis	stered agent, or both	
SIGNATUI	RE:			
	Electronic Signature of Registered A	gent Date	e	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	
Fitle: Name: Address: City-St-Zip:	T () Delete VEZINA, NORMA 1513 CHARLOTTE DRIVE SEBRING, FL 33875	Title: T (X) Change () A Name: HARSHMAN, TINA MRS. Address: 6741 SPARTA RD. City-St-Zip: SEBRING, FL 33875	ddition	
lame: .ddress:	D () Delete BREED, BROOK 310 NEWMAN ROAD SEBRING, FL 33876	Title: D (X) Change () A Name: RUSHLO, DEBRA Address: 3617 PARADISE DR. City-St-Zip: SEBRING, FL 33876	ddition	
ame: ddress: ity-St-Zip: itle: ame: ddress:	BREED, BROOK 310 NEWMAN ROAD	Name: RUSHLO, DEBRA Address: 3617 PARADISE DR.		
ritle: lame: laddress: city-St-Zip: ritle: lame: lddress: city-St-Zip: ritle: lame: lame: lddress: city-St-Zip:	BREED, BROOK 310 NEWMAN ROAD SEBRING, FL 33876 S () Delete MCLEOD, CYNTHIA G 3016 VALERIE DRIVE	Name: RUSHLO, DEBRA Address: 3617 PARADISE DR. City-St-Zip: SEBRING, FL 33876 Title: S (X) Change () A Name: COCHRANE, DONNA Address: 121 BRITTANY LANE	ddition	

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.

City-St-Zip:

SEBRING, FL 33876

SIGNATURE: NORMA VEZINA T 05/28/2009