

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000480

FILED
Apr 17, 2009
Secretary of State

Entity Name: NAPLES HIGH SCHOOL BAND BOOSTERS, INC.

Current Principal Place of Business:

1100 22ND AVENUE NORTH
NAPLES, FL 34103 US

New Principal Place of Business:

1100 GOLDEN EAGLE CIRCLE
NAPLES, FL 34102 US

Current Mailing Address:

P. O. BOX 10151
NAPLES, FL 34101 US

New Mailing Address:

FEI Number: 31-1496035 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAISER, BRENDA
1100 22ND AVE NORTH
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

GOBY, SUE A
2811 66TH STREET SW
NAPLES, FL 34105 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: SUE GOBY

04/17/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KAISER, BRENDA
Address: 1100 22ND AVENUE NORTH
City-St-Zip: NAPLES, FL 34103

Title: TD () Delete
Name: KOOP, JOAN
Address: 1100 22ND AVENUE NORTH
City-St-Zip: NAPLES, FL 34103

Title: VPD () Delete
Name: ROBINETTE, BRAD
Address: 1100 22ND AVENUE NORTH
City-St-Zip: NAPLES, FL 34103

Title: VPD (X) Delete
Name: HUTCHINSSON, GREG
Address: 1100 22ND AVENUE NORTH
City-St-Zip: NAPLES, FL 34103

Title: SEC (X) Delete
Name: COOLEY, GLORIA
Address: 1100 22ND AVENUE NORTH
City-St-Zip: NAPLES, FL 34103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SPEARS, CHARLENE
Address: 3320 MALAGA WAY
City-St-Zip: NAPLES, FL 34105

Title: TD (X) Change () Addition
Name: ERVIN, LISA
Address: 1387 14TH AVE N
City-St-Zip: NAPLES, FL 34102

Title: SD (X) Change () Addition
Name: BAILEY, JODI
Address: 2560 ROYAL PALM CT
City-St-Zip: NAPLES, FL 34103

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

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: CHARLENE SPEARS

PD

04/17/2009

Electronic Signature of Signing Officer or Director

Date