## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N95000000908

FILED Apr 30, 2007 Secretary of State

Entity Name: PORT ST. LUCIE HIGH SCHOOL BAND BOOSTERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 1201 SE JAGUAR LANE PORT ST. LUCIE, FL 34952 **Current Mailing Address: New Mailing Address:** 2002 SE DOVERBROOK ST P.O. BOX 8297 PORT ST. LUCIE, FL 34983 PORT ST. LUCIE, FL 34985 FEI Number: 65-0631528 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FARRELL, RICKEY L ESQ 1595 S.E. PORT ST. LUCIE BLVD. PORT ST. LUCIE, FL 34952 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete FLUSS, IRA Name: Name: 3017 SE DARIEN RD Address: Address: City-St-Zip: PORT SAINT LUCIE, FL 34952 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition Name: CUMMINS, LISA Name: SHEA, STEPHEN Address: 2102 SE ELMHURST RD Address: 802 SE STEAMLET AVENUE City-St-Zip: PORT SAINT LUCIE, FL 34952 City-St-Zip: PORT SAINT LUCIE, FL 34983 Title: () Delete Title: () Change () Addition LE BON, CATHY Name: Name: 2002 SE DOVERBROOK ST. Address: Address: City-St-Zip: PORT ST. LUCIE, FL 34983 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition CAMPBELL, RHONDA Name: Name: BEAULIEU, DIANNE Address: 2481 SE CALUSA AVE Address: 2085 SE WATERCREST ST City-St-Zip: PORT ST. LUCIE, FL 34952 City-St-Zip: PORT ST. LUCIE, FL 34984

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: CATHY LEBON T 04/30/2007