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Apr 18 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT **1997**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N96000001869 (4)**

1. Corporation Name

DURANT HIGH SCHOOL BAND BOOSTERS CLUB, INC.

Principal Place of Business	Mailing Address
DURANT HIGH SCHOOL 8383 TURKEY CREEK ROAD PLANT CITY FL 33567	DURANT HIGH SCHOOL 8383 TURKEY CREEK ROAD PLANT CITY FL 33567-3001

3. Date Incorporated or Qualified: 04/01/1996
3a. Date of Last Report:

2. Principal Place of Business
21 4748 COUGAR PATH
22 Suite, Apt. #, etc.
23 City & State: PLANT CITY FL
24 Zip: 33567
25 Country: U.S.

2a. Mailing Address
26 4748 COUGAR PATH
27 Suite, Apt. #, etc.
28 City & State: PLANT CITY FL
29 Zip: 33567
30 Country: U.S.

4. FEI Number: 59-3328992 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

BERGHOLM, ERIC
DURANT HIGH SCHOOL
8383 TURKEY CREEK ROAD
PLANT CITY FL 33567

10. Name and Address of New Registered Agent

81 Name: BRUNING, CARLA
82 Street Address (P.O. Box Number is Not Acceptable): DURANT HIGH SCHOOL
83: 4748 COUGAR PATH
84 City: PLANT CITY FL 85 Zip Code: 33567

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: Carla Bruning Assistant Principal CARLA BRUNING 4/10/97
(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE		☐ DELETE	1.1 TITLE	P/D	☐ Change ☒ Addition
NAME			1.2 NAME	MALLORY HODGE	
STREET ADDRESS			1.3 STREET ADDRESS	4748 COUGAR PATH	
CITY-ST-ZIP			1.4 CITY-ST-ZIP	PLANT CITY FL 33567	
TITLE		☐ DELETE	2.1 TITLE	VP/D	☐ Change ☒ Addition
NAME			2.2 NAME	ANITA GILLESPIE	
STREET ADDRESS			2.3 STREET ADDRESS	4748 COUGAR PATH	
CITY-ST-ZIP			2.4 CITY-ST-ZIP	PLANT CITY FL 33567	
TITLE		☐ DELETE	3.1 TITLE	D	☐ Change ☒ Addition
NAME			3.2 NAME	CARLA BRUNING	
STREET ADDRESS			3.3 STREET ADDRESS	4748 COUGAR PATH	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	PLANT CITY FL 33567	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (9/96)

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Carla Bruning CARLA BRUNING (813) 757-9075
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone # 0046196