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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N96000001869

1. Corporation Name

DURANT MUSIC BOOSTERS, INC.

Principal Place of Business

4748 COUGAR PATH
PLANT CITY FL 33567
US

Mailing Address

4748 COUGAR PATH
PLANT CITY FL 33567
US



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

24

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

3. Date Incorporated or Qualified

04/01/1996

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

9. Name and Address of Current Registered Agent

MIKE WITCHOSKEY
DURANT HIGH SCHOOL
4748 COUGAR PATH
PLANT CITY FL 33567

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 *[Signature]*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☒ DELETE
NAME HODGE, MALLORY
STREET ADDRESS 4748 COUGAR PATH
CITY-ST-ZIP PLANT CITY FL

TITLE VPD ☐ DELETE
NAME GILLESPIE, ANITA
STREET ADDRESS 4748 COUGAR PATH
CITY-ST-ZIP PLANT CITY FL

TITLE D ☐ DELETE
NAME MIKE WITCHOSKEY
STREET ADDRESS 4748 COUGAR PATH
CITY-ST-ZIP PLANT CITY FL 33567

TITLE TREA ☒ DELETE
NAME BRIGITTE M HODGE
STREET ADDRESS 4748 COUGAR PATA
CITY-ST-ZIP PLANT CITY FL 33567

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President ☒ Change ☒ Addition
1.2 NAME Candi Jackson
1.3 STREET ADDRESS 4748 Cougar Path
1.4 CITY-ST-ZIP Plant City, FL 33567

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE Treasurer ☒ Change ☐ Addition
4.2 NAME Sue Simonz
4.3 STREET ADDRESS 4748 Cougar Path
4.4 CITY-ST-ZIP Plant City, FL 33567

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I 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, with all other like empowered.

SIGNATURE: *[Signature]*

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-29-99
Date

Daytime Phone #

CR2E037 (11/98)