2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004
Secretary of State

DOCUMENT# N96000003809

Entity Name: CYPRESS LAKE MIDDLE SCHOOL BAND BOOSTERS, INCORPORATED

Current Principal Place of Business:

8901 CYPRESS LAKE DR
FT MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

8901 CYPRESS LAKE DR
FT MYERS, FL 33919

New Mailing Address:

FEI Number: 65-0691169 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BUFTER, STEPHEN T
3000 IMMOKALEE RD
NAPLES, FL 33999 US

Name and Address of New Registered Agent:

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:

Title: PD ( ) Delete
Name: BEATTIE, RICHARD
Address: 1206 NE 12TH TERRACE
City-St-Zip: CAPE CORAL, FL 33904

Title: VD ( ) Delete
Name: HUNT, LYNN
Address: 21262 BRAXFIELD LOOP
City-St-Zip: ESTERO, FL 33928

Title: SD ( ) Delete
Name: BUMSTED, HOLLY
Address: 3631 HERITAGE LANE
City-St-Zip: FORT MYERS, FL 33908

Title: TD ( ) Delete
Name: DODRILL, KAREN
Address: 12410 MCGREGOR WOODS CIRCLE
City-St-Zip: FORT MYERS, FL 33908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 for the exemption stated in Section 119.07(3)(i), 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: KAREN M DODRILL T 04/26/2004

Electronic Signature of Signing Officer or Director — Date