

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N96000005923

FILED
May 01, 2002 8:00 AM
Secretary of State

Entity Name: KANAPAHA BAND BOOSTERS, INCORPORATED

Current Principal Place of Business:

5005 S.W. 75TH STREET
GAINESVILLE, FL 32608

New Principal Place of Business:

Current Mailing Address:

5005 S.W. 75TH STREET
GAINESVILLE, FL 32608

New Mailing Address:

FEI Number: 59-3425270

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POE, GERALD D.M.A.
C/O KANAPAHA MIDDLE SCHOOL
5005 S.W. 75TH STREET
GAINESVILLE, FL 32608 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: BAKUZONIS, KAREN
Address: 215 SW 136TH STREET
City-St-Zip: NEWBERRY, FL 32669

Title: V () Delete
Name: JOHNSON, ISABEL
Address: 6623 SW 100TH LANE
City-St-Zip: GAINESVILLE, FL 32608

Title: SD () Delete
Name: MARTIN, MARSHA
Address: 101 SW 36TH STREET
City-St-Zip: GAINESVILLE, FL 32607

Title: TD () Delete
Name: JOHNSON, RAY
Address: 6623 SW 100TH LANE
City-St-Zip: GAINESVILLE, FL 32608

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: RAY JOHNSON

TD

05/01/2002

Electronic Signature of Signing Officer or Director

Date