

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 24, 2003 8:00 am
Secretary of State

02-07-2003 90095 048 ****61.25

DOCUMENT # N97000002798

1. Entity Name
BELL BAND BOOSTERS, INC.



Principal Place of Business
**930 S MAIN STREET
BELL FL 32619**

Mailing Address
**P.O. BOX 345
BELL FL 32619**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3447952**

Applied For
Not Applicable

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



CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**MOORE, CORNELIA S
HC4 BOX 454-2
OLD TOWN FL 32680**

7. Name and Address of New Registered Agent

Name **Rhonda R. Thomas**

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

809 S. main St.

City **Bell**

FL

Zip Code **32619**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Rhonda R. Thomas*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	MAHONEY, MARSHA	
STREET ADDRESS	6859 NW 35TH ST	
CITY-ST-ZIP	BELL FL 32619	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	FOWLER, DEANNA	
STREET ADDRESS	2189 SE 4TH CRT	
CITY-ST-ZIP	TRENTON FL 32693	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	AUDLEY, MARIANNE	
STREET ADDRESS	1869 SE 22ND PL	
CITY-ST-ZIP	BELL FL 32619	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	MOORE, CORNELIA S	
STREET ADDRESS	HC-4 BOX 452	
CITY-ST-ZIP	OLD TOWN FL 32680	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Pailey, Joy	
STREET ADDRESS	5719 NE 98th Ave	
CITY-ST-ZIP	High Springs Fl. 32643	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Jean Anne Cannon	
STREET ADDRESS	3500 NE 71st Ave	
CITY-ST-ZIP	High Springs Fl. 32643	
TITLE	V-PR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Cindy Scott	
STREET ADDRESS	6800 NE 65th St.	
CITY-ST-ZIP	High Springs, Fl. 32643	
TITLE	Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Rhonda R. Thomas	
STREET ADDRESS	5280 SW 7th Pl.	
CITY-ST-ZIP	Bell FL 32619	
TITLE	Secretary - D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Theresa Brown	
STREET ADDRESS	2150 NW 30th St.	
CITY-ST-ZIP	Bell FL 32619	
TITLE	Vol-coordinator	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Adele Smith	
STREET ADDRESS	PoBox 3267	
CITY-ST-ZIP	High Springs FL 32643	

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with or without other like empowered.

SIGNATURE: *Rhonda R. Thomas* **DR. THOMAS**

Signature and typed or printed name of signing officer or director

2-5-03

Date

352463-7300

Daytime Phone #

CR2E037 (10/02)