

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Jul 13, 2012
Secretary of State**

DOCUMENT# N97000006470

Entity Name: CATEGORY 5 MUSIC PROGRAM BOOSTERS, INC.**Current Principal Place of Business:**C/O PALM HARBOR UNIVERSITY HIGH SCHOOL
1900 OMAHA STREET
PALM HARBOR, FL 34683**New Principal Place of Business:****Current Mailing Address:**C/O PALM HARBOR UNIVERSITY HIGH SCHOOL
1900 OMAHA STREET
PALM HARBOR, FL 34683**New Mailing Address:****FEI Number:** 59-3478310**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**KELTON, NORMAN
658 HOUSE WREN CIRCLE
PALM HARBOR, FL 34683 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
Name: KELTON, NORMAN
Address: 658 HOUSE WREN CIRCLE
City-St-Zip: PALM HARBOR, FL 34683**Title:** VD
Name: GREGORY, CHRIS
Address: 824 FRANKLIN CIRCLE
City-St-Zip: PALM HARBOR, FL 34683**Title:** SD
Name: DRAYER, LIZ
Address: 3175 HYDE PARK DRIVE
City-St-Zip: CLEARWATER, FL 33761**Title:** TD
Name: REILLY, ANDREA
Address: 1712 E. LAKE WOODLANDS PKWY.
City-St-Zip: OLDSMAR, FL 34677

I hereby 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 all other like empowered.

SIGNATURE: NORMAN KELTON

PD

07/13/2012

Electronic Signature of Signing Officer or Director

Date