

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002061

FILED
Apr 30, 2006
Secretary of State

Entity Name: WCY MUSIC BOOSTERS, INC.

Current Principal Place of Business:

901 NW 129 AVE, #711
PEMBROKE PINES, FL 33028

New Principal Place of Business:

Current Mailing Address:

901 NW 129 AVE, #711
PEMBROKE PINES, FL 33028

New Mailing Address:

FEI Number: 65-1137872

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DEBRA, CRUM E
11910 N.W. 22ND STREET
PEMBROKE PINES, FL 33026 US

Name and Address of New Registered Agent:

FUENTES-MAHECHA, VICTORIA
1649 NW 143 WAY
PEMBROKE PINES, FL 33028 US

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: VICTORIA FUENTES-MAHECHA

04/30/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DS () Delete
Name: ROLFS, BONNIE
Address: 11810 SHERIDAN STREET
City-St-Zip: PEMBROKE PINES, FL 33026

Title: DVP () Delete
Name: THOMPSON, WENDY
Address: 16334 N.W. 19TH STREET
City-St-Zip: PEMBROKE PINES, FL 33028

Title: DT () Delete
Name: SANTANA, MARTHA
Address: 13021 N.W. 12 STREET
City-St-Zip: PEMBROKE PINES, FL 33028

Title: DP () Delete
Name: CRUM, DEBRA E
Address: 11910 N.W. 22 STREET
City-St-Zip: PEMBROKE PINES, FL 33026

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DS (X) Change () Addition
Name: MORALES, HOLLY
Address: 15650 SW 16 COURT
City-St-Zip: PEMBROKE PINES, FL 33027

Title: DVP (X) Change () Addition
Name: CONFER, HEATHER
Address: 1140 NW 144 AVENUE
City-St-Zip: PEMBROKE PINES, FL 33028

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

Title: DP (X) Change () Addition
Name: FUENTES-MAHECHA, VICTORIA
Address: 1649 NW 143 WAY
City-St-Zip: PEMBROKE PINES, FL 33028

Title: DVP () Change (X) Addition
Name: GARDINER, ALTHEA
Address: 11600 NW 18 STREET
City-St-Zip: PEMBROKE PINES, FL 33026

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: VICTORIA FUENTES-MAHECHA

DP

04/30/2006

Electronic Signature of Signing Officer or Director

Date