2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 09, 2007
Secretary of State

DOCUMENT# N98000002061

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 ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

MORALES, HOLLY A
15650 SW 16 CT
PEMBROKE PINES, FL 33029 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: HOLLY MORALES 09/09/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

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

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

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT (X) Change ( ) Addition
Name: SHEERER, RAMONA
Address: 15639 SW 16 ST
City-St-Zip: PEMBROKE PINES, FL 33027

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 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: HOLLY MORALES DP 09/09/2007
Electronic Signature of Signing Officer or Director Date