

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Jun 19, 2001 8:00 am**
Secretary of State

05-03-2001 90085 011 ****61.25

DOCUMENT # N99000002997

1. Entity Name

BAND BOOSTERS OF DUNEDIN HIGH SCHOOL, INC.

Principal Place of Business

1651 PINEHURST ROAD
DUNEDIN FL 34698

Mailing Address

1651 PINEHURST ROAD
DUNEDIN FL 34698

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Dunedin FL

Zip

Country

Zip

Country

34697

4. FEI Number

59-2102412

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DUNSIZER, MADELINE F
1651 PINEHURST ROAD
DUNEDIN FL 34698**

Name

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

City

FL

Zip Code

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.

SIGNATURE

Madeline F. Dunsizer**4-27-01**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
FEE IS \$81.25**9. Election Campaign Financing
Trust Fund Contribution ☐**\$5.00 May Be
Added to Fees****Make Check Payable to
Department of State****10. OFFICERS AND DIRECTORS****11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE	PD	☐ Delete
NAME	WOLF, MARGARET M	
STREET ADDRESS	487 MACLEOD TERRACE	
CITY-ST-ZIP	DUNEDIN FL 34698	
TITLE	VPD	☐ Delete
NAME	MCCOY, PAUL	
STREET ADDRESS	1675 CINNAMON LANE	
CITY-ST-ZIP	PALM HARBOR FL 34683	
TITLE	SD	☐ Delete
NAME	CIOFFI, FRANK	
STREET ADDRESS	2067 GLENBROOK DR.	
CITY-ST-ZIP	DUNEDIN FL 34698	
TITLE	T	☐ Delete
NAME	MCCOY, SHEILA	
STREET ADDRESS	1675 CINNAMON LANE	
CITY-ST-ZIP	PALM HARBOR FL 34683	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	PD	☐ Change ☐ Addition
NAME	Sam Marchand	
STREET ADDRESS	1170 Rpbmar Rd	
CITY-ST-ZIP	Dunedin FL 34698	
TITLE	VD	☐ Change ☐ Addition
NAME	Diane MacLennan	
STREET ADDRESS	1000 Michigan Blvd	
CITY-ST-ZIP	Dunedin FL 34698	
TITLE	SD	☐ Change ☐ Addition
NAME	Mary Hoover	
STREET ADDRESS	700 Scotland	
CITY-ST-ZIP	Dunedin FL 34698	
TITLE	T	☐ Change ☐ Addition
NAME	Susan Marsh	
STREET ADDRESS	2062 Southpointe Dr	
CITY-ST-ZIP	Dunedin FL 34698	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 all other like empowered.

SIGNATURE:

4/27/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)