

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

09-17-2003 90023 024 \*\*\*\*61.25

N99000002997

FILED

03 SEP 19 PM 2:11

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N99000002997

1. Entity Name

BAND BOOSTERS OF DUNEDIN HIGH SCHOOL, INC.



Principal Place of Business

1651 PINEHURST ROAD  
DUNEDIN FL 34698

Mailing Address

P.O. BOX 378  
DUNEDIN FL 34697

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

1651 Pinehurst Rd

Suite, Apt. #, etc.



☐ CHECK HERE IF MAKING CHANGES

City & State

City & State

Dunedin, FL

4. FEI Number 59-2102412

Applied For

Not Applicable

Zip

Country

Zip

Country

34698

U.S.A.

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

6. Name and Address of Current Registered Agent

LIZOTTE, THOMAS  
1651 PINEHURST ROAD  
DUNEDIN FL 34698

7. Name and Address of New Registered Agent

Name

James Dykes

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

1651 Pinehurst Rd

City

Dunedin

FL

Zip Code

34698

I, 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

*[Signature]*

(NOTE: Registered Agent signature required when reinstating)

7-24-03

DATE

FILE NOW: FEE IS \$61.25

After September 10, 2003, min will be \$236.25

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	PD	<input checked="" type="checkbox"/> Delete
NAME	LYNAM, KENNETH R	
STREET ADDRESS	2293 CAROLYN DRIVE	
CITY-ST-ZIP	DUNEDIN FL 34698	
TITLE	VPO	<input checked="" type="checkbox"/> Delete
NAME	STEVENS, KENNETH	
STREET ADDRESS	1617 AMBERLEA DR	
CITY-ST-ZIP	DUNEDIN FL 34698	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	SHARP, TERESA	
STREET ADDRESS	1350 GLENDALE DRIVE	
CITY-ST-ZIP	DUNEDIN FL 34698	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	DAVIS, CRAIG	
STREET ADDRESS	1468 DINNERBELL LANE E	
CITY-ST-ZIP	DUNEDIN FL 34698	
TITLE	D	<input type="checkbox"/> Delete
NAME	OSTRANDER, DAVID	
STREET ADDRESS	1445 ADMIRAL WOODSON LANE	
CITY-ST-ZIP	CLEARWATER FL 33755	
TITLE	D	<input type="checkbox"/> Delete
NAME	EVERETT, SUSAN	
STREET ADDRESS	1714 PRINCE PHILLIP STREET	
CITY-ST-ZIP	CLEARWATER FL 33755	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P/O	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	David Everett	
STREET ADDRESS	1714 Prince Phillip St	
CITY-ST-ZIP	Clearwater, FL 34698	
TITLE	VPO	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Jenny Keith	
STREET ADDRESS	1090 Fox Hollow Dr.	
CITY-ST-ZIP	Dunedin, FL 34698	
TITLE	S/O	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Lauri Kaiser	
STREET ADDRESS	1118 New York Ave	
CITY-ST-ZIP	Dunedin, FL 34698	
TITLE	T/O	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Kathy Cyr	
STREET ADDRESS	999 San Pedro Dr.	
CITY-ST-ZIP	Dunedin, FL 34698	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-24-03

Date

727-441-3239

Daytime Phone #

CR2E037 (4/03)