

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25737

Entity Name: THE MARCHING WOLVERINE BAND PARENT AND BOOSTER ASSOCIATION, INC.

FILED
Apr 04, 2017
Secretary of State
CC6962346710

Current Principal Place of Business:

NORTHEAST RECREATION CENTER
801 AVENUE T NE
WINTER HAVEN, FL 33881

Current Mailing Address:

2107 9TH ST NE
WINTER HAVEN, FL 33881 US

FEI Number: 52-2315257

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

WILLIAMS, THEODORE JR
654 AVE. O SW
WINTER HAVEN, FL 33880 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name JAMES, KENNETH
Address 1315 10TH STREET NE
City-State-Zip: WINTER HAVEN FL 33881

Title D
Name FLOYD, DONZELL
Address 2447 MARY B. JEWETT CIRCLE
City-State-Zip: WINTER HAVEN FL 33881

Title D
Name JONES, GLENDA
Address 1817 2ND STREET NW
City-State-Zip: WINTER HAVEN FL 33881

Title D
Name THOMPSON, GERRI I
Address 556 AVE. T N.E.
City-State-Zip: WINTER HAVEN FL 33881

Title P
Name WILLIAMS, THEODORE JR
Address 654 AVE. O SW
City-State-Zip: WINTER HAVEN FL 33880

Title S
Name WILLIAMS, AUDRIE L
Address 2107 9TH STREET N.E.
City-State-Zip: WINTER HAVEN FL 33881

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: AUDRIE L. WILLIAMS

SECRETARY

04/04/2017

Electronic Signature of Signing Officer/Director Detail

Date