2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2008
Secretary of State

DOCUMENT# N05000008901

Entity Name: ORLANDO FIREFIGHTERS PIPES AND DRUMS, INC.

Current Principal Place of Business:

540 CORAL TRACE BLVD.
EDGEWATER, FL 32132

New Principal Place of Business:

Current Mailing Address:

540 CORAL TRACE BLVD.
EDGEWATER, FL 32132

New Mailing Address:

FEI Number: 16-1730483 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NEGEDLY, MATTHEW L
540 CORAL TRACE BLVD.
EDGEWATER, FL 32132 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: STALLINGS, MICHAEL
Address: 2226 SPRING CREEK CIRCLE NE
City-St-Zip: PALM BAY, FL 32905 US

Title: D ( ) Delete
Name: LEWIS, WALTER
Address: 2226 SPRING CREEK CIRCLE NE
City-St-Zip: PALM BAY, FL 32905 US

Title: D ( ) Delete
Name: HAMMOND, SCOTT
Address: 2226 SPRING CREEK CIRCLE NE
City-St-Zip: PALM BAY, FL 32905 US

Title: D ( ) Delete
Name: NEGEDLY, MATTHEW
Address: 540 CORAL TRACE BLVD.
City-St-Zip: EDGEWATER, FL 32132 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: MATTHEW NEGEDLY DIRE 03/11/2008

Electronic Signature of Signing Officer or Director — Date