

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005509

FILED
Feb 25, 2011
Secretary of State

Entity Name: THE FLORIDA WIND BAND, INC.

Current Principal Place of Business:

4202 E FOWLER AVE
FAH 208
TAMPA, FL 336207350

New Principal Place of Business:

Current Mailing Address:

5004 E FOWLER AVE
#C140
TAMPA, FL 33617

New Mailing Address:

FEI Number: 26-2517523 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CARMICHAEL, ALISA
4202 E FOWLER AVE
FAH 208
TAMPA, FL 336207350 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
Name: COLLINS, AMY
Address: 4202 E FOWLER AVE
City-St-Zip: TAMPA, FL 33620 US

Title: D
Name: BOARDMAN, BEVERLY
Address: 64 VIC EDWARDS RD
City-St-Zip: SARASOTA, FL 34240

Title: D
Name: FULLER, KEVIN
Address: 7408 MARIA COVE
City-St-Zip: RIVERVIEW, FL 33578 US

Title: D
Name: CARMICHAEL, JOHN C
Address: 201 WILLOWICK LANE
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: D
Name: CRAMER, KEVIN
Address: 161133 N DALE MABRY HWY
City-St-Zip: TAMPA, FL 33618

Title: D
Name: MCCUTCHEN, MATT
Address: 5004 E FOWLER AVE
City-St-Zip: TAMPA, FL 33617 FL

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: ALISA R. CARMICHAEL

D

02/25/2011

Electronic Signature of Signing Officer or Director

Date