

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35295

FILED
Mar 20, 2009
Secretary of State

Entity Name: CHARLOTTE COUNTY CONCERT BAND, INC.

Current Principal Place of Business:

CHARLOTTE COUNTY CONCERT BAND
21293 COACHMAN AVE
PORT CHARLOTTE, FL 33952 US

New Principal Place of Business:

Current Mailing Address:

C/O PEGGY J. MOCK
21293 COACHMAN AVE.
PORT CHARLOTTE, FL 33952 US

New Mailing Address:

FEI Number: 65-0246735 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOCK, PEGGY J
21293 COACHMAN AVE.
PORT CHARLOTTE, FL 33952 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: PD () Delete
Name: MOCK, PEGGY J
Address: 21293 COACHMAN AVE.
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: VD () Delete
Name: PRATHER, MARY
Address: 232 E TARPON BLVD. NW
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: SD () Delete
Name: MOORE, BRENDA
Address: 1176 GREEN OAK TRAIL
City-St-Zip: PORT CHARLOTTE, FL 44948

Title: D () Delete
Name: PARTRIDGE, CINDY
Address: 504 EPPINGER DRIVE
City-St-Zip: PORT CHARLOTTE, FL 33981

Title: D () Delete
Name: MIENTUS, CHET
Address: 18702 COUNTRYMAN AVE
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: TD () Delete
Name: ANNA, REBELLO
Address: 1437 RED OAK LANE
City-St-Zip: PORT CHARLOTTE, FL 33948

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:

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: PEGGY J MOCK

PD

03/20/2009

Electronic Signature of Signing Officer or Director

_____ Date