2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008901

FILED Mar 27, 2009 Secretary of State

Entity Name: ORLANDO FIREFIGHTERS PIPES AND DRUMS, INC.

Current Principal Place of Business: New Principal Place of Business:

540 CORAL TRACE BLVD. EDGEWATER, FL 32132

Current Mailing Address: New Mailing Address:

540 CORAL TRACE BLVD. EDGEWATER, FL 32132

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition Name:

STALLINGS, MICHAEL STALLINGS, MICHAEL Name: 2226 SPRING CREEK CIRCLE NE Address: 2226 SPRING CREEK CIRCLE NE Address:

City-St-Zip: PALM BAY, FL 32905 US City-St-Zip: PALM BAY, FL 32905 US

Title: () Delete Title: (X) Change () Addition Name: LEWIS, WALTER Name: HAMMOND, SCOTT

Address: 2226 SPRING CREEK CIRCLE NE Address: 8705 KIOWA TRAIL City-St-Zip: PALM BAY, FL 32905 US City-St-Zip: KISSIMMEE, FL 34747 US

Title: () Delete Title: (X) Change () Addition

HAMMOND, SCOTT NEGEDLY, MATTHEW Name: Name: 2226 SPRING CREEK CIRCLE NE 540 CORAL TRACE BLVD Address: Address: City-St-Zip: PALM BAY, FL 32905 US City-St-Zip: EDGEWATER, FL 32132 US

Title: (X) Delete Title: () Change () Addition

NEGEDLY, MATTHEW Name: Name: Address: 540 CORAL TRACE BLVD. Address: City-St-Zip: EDGEWATER, FL 32132 US 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 S/T 03/27/2009