#### 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 749247** 

Entity Name: GREATER MIAMI COMMUNITY CONCERT BAND, INC.

FILED Feb 20, 2018 Secretary of State CC1923322146

## **Current Principal Place of Business:**

9981 SW 37 TER MIAMI, FL 33165-3933

### **Current Mailing Address:**

P.O. BOX 16-1233

MIAMI, FL 33116-1233 US

FEI Number: 59-2099857 Certificate of Status Desired: Yes

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

PROCTOR, THOMAS 9981 SW 37 TER MIAMI, FL 33165-3933 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: THOMAS PROCTOR 02/20/2018

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title	PRESIDENT	Title	SECRETARY
Name	PROCTOR, THOMAS	Name	WOLFE, ALAN C.
Address	9981 SW 37 TER	Address	P. O. BOX 16-1233
City-State-Zip:	MIAMI FL 33165-3933	City-State-Zip:	MIAMI FL 33116

Title TREASURER Title CHAIRMAN

Name SIMPKINS, SUE Name BLANK-WOLFE, SUSIE

Address 10041 SW 134TH STREET Address P.O. BOX 16-1233

Address 10041 SW 1341H STREET Address P.O. BOX 16-1233
City-State-Zip: MIAMI FL 33176-6140 City-State-Zip: MIAMI FL 33116

Title DIRECTOR Title DIRECTOR

Name HEATH, GARY Name PASCUAL-FERNANDEZ, CHRISTINE

 Address
 11940 SW 188 TERRACE
 Address
 22904 SW 105 AVENUE

 City-State-Zip:
 MIAMI FL 33177
 City-State-Zip:
 MIAMI FL 33190-1190

TitleDIRECTORTitleDIRECTORNameALEXANDER, BRUCENameMISTELE, TIM

Address 10464 S.W. 118TH STREET Address 10200 CORAL CREEK ROAD

City-State-Zip: MIAMI FL 33176 City-State-Zip: CORAL GABLES FL 33156

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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: THOMAS F G PROCTOR PRE

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

02/20/2018

Date

## Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

NamePARENTE, CARMINENameBUSCEMI, CHARLES PAddress1131 N.W. 118TH AVE.Address1747 SW 16TH TERRACE

City-State-Zip: PLANTATION FL 33323 City-State-Zip: MIAMI FL 33145

Title DIRECTOR Title DIRECTOR

Name SIMON, KEVIN J. Name DWIGHT, DEXTER

Address 830 N.W. 39TH COURT Address 634 ALHAMBRA CIRCLE

City-State-Zip: MIAMI FL 33126 City-State-Zip: CORAL GABLES FL 33134