

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 749247

**FILED**  
**Feb 23, 2017**  
**Secretary of State**  
**CC5314096628**

**Entity Name:** GREATER MIAMI COMMUNITY CONCERT BAND, INC.

**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**

**02/23/2017**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            PROCTOR, THOMAS  
Address        9981 SW 37 TER  
City-State-Zip: MIAMI FL 33165-3933

Title            SECRETARY  
Name            WOLFE, ALAN C.  
Address        P. O. BOX 16-1233  
City-State-Zip: MIAMI FL 33116

Title            TREASURER  
Name            SIMPKINS, SUE  
Address        10041 SW 134TH STREET  
City-State-Zip: MIAMI FL 33176-6140

Title            CHAIRMAN  
Name            BLANK-WOLFE, SUSIE  
Address        P.O. BOX 16-1233  
City-State-Zip: MIAMI FL 33116

Title            DIRECTOR  
Name            HEATH, GARY  
Address        11940 SW 188 TERRACE  
City-State-Zip: MIAMI FL 33177

Title            DIRECTOR  
Name            PASCUAL-FERNANDEZ, CHRISTINE  
Address        22904 SW 105 AVENUE  
City-State-Zip: MIAMI FL 33190-1190

Title            DIRECTOR  
Name            ALEXANDER, BRUCE  
Address        10464 S.W. 118TH STREET  
City-State-Zip: MIAMI FL 33176

Title            DIRECTOR  
Name            ROSENBERG, NANCY  
Address        13030 NORTH CALUSA CLUB DR.  
City-State-Zip: MIAMI FL 33186

**Continues on page 2**

*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 PROCTOR**

**PRESIDENT**

**02/23/2017**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name PARENTE, CARMINE  
Address 1131 N.W. 118TH AVE.  
City-State-Zip: PLANTATION FL 33323

Title DIRECTOR  
Name COLLINGS, DAVID S.  
Address 10744 N. KENDALL DR.  
City-State-Zip: MIAMI FL 33176-1445

Title DIRECTOR  
Name SIMON, KEVIN J.  
Address 830 N.W. 39TH COURT  
City-State-Zip: MIAMI FL 33126