2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004066

Entity Name: NORTH PORT CONCERT BAND, INC.

FILED Jan 23, 2016 **Secretary of State** CC8136128055

Current Principal Place of Business:

6400 WEST PRICE BOULEVARD MUSIC SUITE NORTH PORT, FL 34286

Current Mailing Address:

3334 PURPLE MARTIN DRIVE **UNIT 126** PUNTA GORDA, FL 33950 US

FEI Number: 72-1525804 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MELLOR, CORD C C/O MELLOR & GRISSINGER, ATTORNEYS AT LAW 13801 SOUTH TAMIAMI TRAIL, SUITE D NORTH PORT, FL 34287 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title Title Ρ

Name MILLER, ROBERT Name SKOWYRA, JOAN

2029 CALUSA LAKES BLVD. 3334 PURPLE MARTIN DR #126 Address Address

City-State-Zip: NAKOMIS FL 34275 City-State-Zip: PUNTA GORDA FL 33950

Title Title DIRECTOR

Name LOWY, LARRY SKOWYRA, JOSEPH Name

Address 2000 BAL HARBOR BLVD.. Address 3334 PURPLE MARTIN DR #126

UNIT 313 PUNTA GORDA FL 33950

City-State-Zip: City-State-Zip: PUNTA GORDA FL 33950

Title D

Title **SECRETARY** Name SILKEBAKKEN, DENNIS Name CLEARY, LYNN Address 1897 SILVER PALM RD. Address 2890 EGRET CT.

City-State-Zip: NORTH PORT FL 34288 NORTH PORT FL 34287 City-State-Zip:

Title DIRECTOR

Name SCHILLING, RAYMOND

1070 LAUREL RD. Address

EAST #5

City-State-Zip: NOKOMIS FL 34275

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.

01/23/2016 SIGNATURE: JOSEPH SKOWYRA TREASURER