

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

DOCUMENT# N07000008490

**Entity Name:** HIGHLANDS COUNTY CONCERT BAND, INC.

**Current Principal Place of Business:**

3820 TANGIER ST.  
SEBRING, FL 33872

**Current Mailing Address:**

3820 TANGIER ST.  
SEBRING, FL 33872

**FEI Number: 27-3938820**

**Certificate of Status Desired: No**

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

SCOTT, GARY A  
3820 TANGIER ST.  
SEBRING, FL 33872 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 D P  
Name HODGES, JOANNE  
Address 2654 S. REDWOOD BLVD.  
City-State-Zip: AVON PARK FL 33825

Title D  
Name PRUNTY, SUSIE  
Address 14 HORSESHOE LANE  
City-State-Zip: LAKE PLACID FL 33852

Title SECRETARY  
Name HODGDON, LORNA  
Address 421 BEAVER RUN ST.  
City-State-Zip: LAKE PLACID FL 33825

Title D VP  
Name WELLS, JAMES  
Address 2703 SANDY LOAM CT.  
City-State-Zip: SEBRING FL 33875

Title D  
Name JOSSELYN, LYNNE  
Address 3637 BROKEN ARROW  
City-State-Zip: SEBRING FL 33872

Title D T  
Name MASON, JOHN  
Address 800 E. CANFIELD ST.  
City-State-Zip: AVON PARK FL 33825

*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: E. JOANNE HODGES**

**PRESIDENT**

**03/31/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date