

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004627

Entity Name: GUITARS OVER GUNS ORGANIZATION, INC.

Current Principal Place of Business:

1439 MILLER RD.
CORAL GABLES, FL 33146

Current Mailing Address:

1439 MILLER RD.
CORAL GABLES, FL 33146

FEI Number: 26-2644682

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BERNSTEIN, FRANK C
1439 MILLER RD.
CORAL GABLES, FL 33146 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 CHIEF FISCAL OFFICER
Name BERNSTEIN, FRANK C
Address 1439 MILLER RD.
City-State-Zip: CORAL GABLES FL 33146

Title CHAIRMAN, TREASURER, DIRECTOR
Name BERNSTEIN, ROBERT
Address 803 MICHIGAN AVE
City-State-Zip: WILMETTE IL 60091

Title PRESIDENT, DIRECTOR
Name BERNSTEIN, CHAD
Address 1439 MILLER RD
City-State-Zip: CORAL GABLES FL 33146

Title VP, SECRETARY, DIRECTOR
Name CAVIGLIA, BIANCA
Address 7411 SW 67 AVENUE
City-State-Zip: MIAMI FL 33143

Title DIRECTOR
Name CAMPBELL, CHRIS
Address 1686 BUTTONBUSH CIR
City-State-Zip: PALM CITY FL 34990

Title DIRECTOR
Name WESTON, RANDALL
Address 401 N WABASH AVENUE
City-State-Zip: CHICAGO IL 60611

Title DIRECTOR
Name DIERMEIER, JEFF
Address 2113 CANNA WAY
City-State-Zip: NAPLES FL 34105

Title DIRECTOR
Name JOHNSON-DEAN, ROSEMARY
Address P.O. BOX 408
City-State-Zip: SIMPSONVILLE KY 40067

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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: FRANK CHADWYCK BERNSTEIN

CEO

02/18/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name PORTUONDO, ABBY
Address 7250 W LAGO DRIVE
City-State-Zip: CORAL GABLES FL 33143

Title DIRECTOR
Name PHILLIPS WESTON, PAMELA
Address 1180 LAUREL AVENUE
City-State-Zip: WINNETKA IL 60093