### 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005509

Entity Name: THE FLORIDA WIND BAND, INC.

FILED
Mar 26, 2018
Secretary of State
CC8325335242

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

4202 E FOWLER AVE

MUS 101

TAMPA, FL 33620

## **Current Mailing Address:**

5004 E FOWLER AVE

#C140

TAMPA FL 33617 US

FEI Number: 26-2517523 Certificate of Status Desired: Yes

# Name and Address of Current Registered Agent:

CARMICHAEL, ALISA R 201 WILLOWICK AVE TAMPA, FL 33617 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 Title

NameCARMICHAEL, ALISA RNameCARMICHAEL, JOHN CAddress201 WILLOWICK AVEAddress201 WILLOWICK AVECity-State-Zip:TAMPA FL 33617City-State-Zip:TAMPA FL 33617

Title O Title O

Name SCULLY, SUSAN D Name MCCUTCHEN, MATT

Address 6704 E 113TH AVE Address 4202 E FOWLER AVE MUS 101

City-State-Zip: TEMPLE TERRACE FL 33617 City-State-Zip: TAMPA FL 33620

Title TREASURER Title O.

Name JOHNSON, PAUL Name HOCUTT, ANNE M

Address 401 FOREST PARK AVE Address 14913 LAKE FOREST DR

City-State-Zip: TAMPA FL 33617 City-State-Zip: LUTZ FL 33559

Title SECRETARY Title MRS

Name VAIL, CHRISTA Name MAY, BETSY

Address 34804 CHELMSFORD LN Address 18416 EASTWYCK DR
City-State-Zip: ZEPHYRHILLS FL 33541 City-State-Zip: TAMPA FL 33547

## 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: ALISA R CARMICHAEL

**EXECUTIVE DIRECTOR** 

03/26/2018

## Officer/Director Detail Continued:

TitleMR.TitleBOARD CHAIRNameBEDELL, GEORGENameCOPE, LAURA

Address 2432 PROSPECT RD Address 10108 QUEENS PARK DR

Title

**OFFICER** 

City-State-Zip: TAMPA FL 33629 City-State-Zip: TAMPA FL 33647

Title OFFICER

Name GOPAL, ARUPA Name LALKA, ANDREA

Address 12406 ORANGE BLOSSOM PLACE Address 125 WALNUT LN

#201 City-State-Zip: LAKE ALFRED FL 33850

Title OFFICER

Title OFFICER

Name NEGRON, TONY
Name NEALE, ROBERT J

Address 4714 W FIELDER ST Address 4714 W FIELDER ST TEMPLE TERPLACE FILE

City-State-Zip: TEMPLE TERRACE FL 33617
City-State-Zip: TAMPA FL 33611