

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000011054

**FILED**  
**Mar 06, 2019**  
**Secretary of State**  
**1155162254CC**

**Entity Name:** ORCHID CITY BRASS BANDS, INC.

**Current Principal Place of Business:**

7965 SE MAMMOTH DRIVE  
HOBE SOUND, FL 33455

**Current Mailing Address:**

7965 SE MAMMOTH DRIVE  
HOBE SOUND, FL 33455 US

**FEI Number:** 46-1384073

**Certificate of Status Desired:** No

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

ESTES, JAMES W  
7965 SE MAMMOTH DRIVE  
HOBE SOUND, FL 33455 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:** JAMES W. ESTES

03/06/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name ESTES, JAMES W  
Address 7965 SE MAMMOTH DRIVE  
City-State-Zip: HOBE SOUND FL 33455

Title T  
Name BERMANN, JAMES F  
Address 8210 WHITEWOOD COVE EAST  
City-State-Zip: LAKE WORTH FL 33467

Title SECRETARY  
Name COMACHO, MANUEL  
Address 4001 GREENWAY DR,  
BAND DEPARTMENT  
City-State-Zip: JUPITER FL 33458

Title DIRECTOR  
Name PATSIS, NICHOLAS  
Address 1420 MICHIGAN DR  
City-State-Zip: LAKE WORTH FL 33461

Title DIRECTOR  
Name SONNTAG, RANDY  
Address 9740 QUAIL TRAIL  
City-State-Zip: JUPITER FL 33478

Title VP  
Name O'CONNOR, MICHAEL DT.  
Address 15669 118TH TERR N  
City-State-Zip: JUPITER FL 33478

Title DIRECTOR  
Name LOPEZ, ANDRES  
Address 7965 SE MAMMOTH DRIVE  
City-State-Zip: HOBE SOUND FL 33455

Title DIRECTOR  
Name SHEARON-SMITH, SARAH  
Address 7965 SE MAMMOTH DRIVE  
City-State-Zip: HOBE SOUND FL 33455

**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:** JAMES W. ESTES

**PRESIDENT**

03/06/2019

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           PEARSON, THOMAS DR.  
Address        7965 SE MAMMOTH DRIVE  
City-State-Zip: HOBE SOUND FL 33455