

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000005473

**FILED**  
**Feb 08, 2016**  
**Secretary of State**  
**CC2072711587**

**Entity Name:** THE BATTLE OF THE BANDS, INC.

**Current Principal Place of Business:**

234 EAST CAMPHOR STREET  
AVON PARK, FL 33825

**Current Mailing Address:**

234 EAST CAMPHOR STREET  
AVON PARK, FL 33825

**FEI Number:** 47-4210229

**Certificate of Status Desired:** Yes

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

FEENEY, ANNA M  
234 EAST CAMPHOR STREET  
AVON PARK, FL 33825 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            PRES  
Name            FEENEY, ANNA M  
Address        234 EAST CAMPHOR STREET  
City-State-Zip: AVON PARK FL 33825

Title            VP  
Name            KNIGHT, CHRISTOPHER J  
Address        234 EAST CAMPHOR STREET  
City-State-Zip: AVON PARK FL 33825

Title            SEC  
Name            HOGAN, ANNA F  
Address        415 WILHITE STREET  
City-State-Zip: AVON PARK FL 33825

Title            TRES, /SEC.  
Name            MALDONADO, ANNA F  
Address        415 WILHITE STREET  
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:** ANNA MARIE FEENEY

**PRESIDENT**

**02/08/2016**

Electronic Signature of Signing Officer/Director Detail

Date