

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

DOCUMENT# N15000009538

**FILED  
Sep 01, 2016  
Secretary of State  
CC8070746420**

**Entity Name:** THE SAINT AUGUSTINE COMMUNITY BAND INC

**Current Principal Place of Business:**

43 LEVANTE WAY  
SAINT AUGUSTINE, FL 32086

**Current Mailing Address:**

43 LEVANTE WAY  
SAINT AUGUSTINE, FL 32086 US

**FEI Number:** 47-5143650

**Certificate of Status Desired:** No

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

MAGNANI, GEOFFREY S  
43 LEVANTE WAY  
SAINT AUGUSTINE, FL 32086 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            DIR  
Name            MAGNANI, GEOFFREY S  
Address        43 LEVANTE WAY  
City-State-Zip: SAINT AUGUSTINE FL 32086

Title            PRESIDENT  
Name            SHARP, FLO  
Address        215 SUNSHINE DRIVE  
City-State-Zip: SAINT AUGUSTINE FL 32086

Title            VP  
Name            MANN, MICHAEL  
Address        3501-B NORTH PONCE DE LEON  
                  BLVD. #341  
City-State-Zip: SAINT AUGUSTINE FL 32084

Title            SECRETARY  
Name            MARKEY, CAROL  
Address        1005 BELLA VISTA BLVD, #111  
City-State-Zip: SAINT AUGUSTINE FL 32084

Title            TREASURER  
Name            IUSO, DEBBIE  
Address        129 CARETTA CIRCLE  
City-State-Zip: SAINT AUGUSTINE FL 32086

*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:** DEBBIE IUSO

**TREASURER**

**09/01/2016**

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

\_\_\_\_\_  
Date