## 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35295

Entity Name: CHARLOTTE COUNTY CONCERT BAND, INC.

FILED
Mar 19, 2014
Secretary of State
CC8340967591

# **Current Principal Place of Business:**

CHARLOTTE COUNTY CONCERT BAND 504 EPINGER DR

PORT CHARLOTTE, FL 33953

# **Current Mailing Address:**

CHARLOTTE COUNTY CONCERT BAND P O BOX 510158 PUNTA GORDA, FL 33951-0158 US

FEI Number: 65-0246735 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

PARTRIDGE, CINDY A 504 EPINGER DR.

PORT CHARLOTTE, FL 33953 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 PD Title VD

Name PARTRIDGE, CINDY A Name PRATHER, MARY

Address 504 EPINGER DR. Address 232 E TARPON BLVD. NW

City-State-Zip: PORT CHARLOTTE FL 33953 City-State-Zip: PORT CHARLOTTE FL 33952

Title SD Title D

Name WARD, JAY Name JOYCE, DOUG

Address 26230 STILLWATER CIRCLE Address 1309 CASEY KEY DRIVE

City-State-Zip: PUNTA GORDA FL 33955 City-State-Zip: PUNTA GORDA FL 33950

Title D Title TD

Name MARTIN, JAN Name CANDACE, FADER

Address 13848 LONG LAKE LANE Address 29185 ORANGEWOOD ST

City-State-Zip: PORT CHARLOTTE FL 33953 City-State-Zip: PUNTA GORDA FL 33982

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: CANDACE PRATHER FADER

**TREASURER** 

03/19/2014