

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710944

FILED  
Apr 26, 2005  
Secretary of State

**Entity Name:** MELBOURNE MUNICIPAL BAND ASSOCIATION, INC.

**Current Principal Place of Business:**

1924 MELODY LANE  
P.O. BOX 3105  
MELBOURNE, FL 329023105 US

**New Principal Place of Business:**

**Current Mailing Address:**

1924 MELODY LANE  
P.O. BOX 3105  
MELBOURNE, FL 329023105 US

**New Mailing Address:**

**FEI Number:** 59-2737045

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CAPLEY, G.W.  
940 WHITMIRE DR  
MELBOURNE, FL 32935 US

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

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

**OFFICERS AND DIRECTORS:**

Title: SD ( ) Delete  
Name: CLEVELAND, STACI  
Address: 322 CAUTHEN CREEK DR  
City-St-Zip: MELBOURNE, FL 32940

Title: VD ( ) Delete  
Name: STAUFFACHER, THOMAS  
Address: 2441 ST VINCENTS WAY  
City-St-Zip: MELBOURNE, FL 32935

Title: D ( ) Delete  
Name: SILLIMAN, REBECCA  
Address: 2808 SOUTH FAIRWAY DRIVE  
City-St-Zip: MELBOURNE, FL 32907

Title: M ( ) Delete  
Name: EWING, DAVID A.  
Address: 1011 MEDALLION DRIVE.  
City-St-Zip: ROCKLEDGE, FL 32955

Title: TD ( ) Delete  
Name: FLORIN, BRUCE  
Address: PO BOX 306  
City-St-Zip: GRANT, FL 32949

Title: PD ( ) Delete  
Name: GOOD, JUDY,  
Address: 322 BANYAN WAY  
City-St-Zip: MELBOURNE BCH, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VD (X) Change ( ) Addition  
Name: GADDIE, JOHN  
Address: 4121 MUSTAND RD  
City-St-Zip: MELBOURNE, FL 32934

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TD (X) Change ( ) Addition  
Name: RUHGE, ROB  
Address: 965 THOMAS BARBOUR DR.  
City-St-Zip: MELBOURNE, FL 32935

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DAVID A EWING

MR

04/26/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date