2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2009
Secretary of State

DOCUMENT# 744830

Entity Name: NAPLES CONCERT BAND, INC.

Current Principal Place of Business:

NAPLES CONCERT BAND
POST OFFICE BOX 31
NAPLES, FL 341060031 US

New Principal Place of Business:

NAPLES CONCERT BAND
1395 PANTHER LANE, SUITE 300
NAPLES, FL 34109 US

Current Mailing Address:

NAPLES CONCERT BAND
POST OFFICE BOX 31
NAPLES, FL 341060031 US

New Mailing Address:

FEI Number: 59-1876197 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CURCIO, THOMAS H
1525 WEYBRIDGE CIR
NAPLES, FL 34110 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:	D	( ) Delete
Name:	BESHEARS, LORI	
Address:	1900 TILLER TERRACE	
City-St-Zip:	NAPLES, FL 34102	
Title:	VPD	( ) Delete
Name:	MARCOTTE, KAREN	
Address:	8179 WILSHIRE BLVD	
City-St-Zip:	NAPLES, FL 34109	
Title:	TD	( ) Delete
Name:	HAINS, TIMOTHY G	
Address:	1395 PANTHER LN., 300	
City-St-Zip:	NAPLES, FL 34109	
Title:	D	( ) Delete
Name:	CONROY, RUTH	
Address:	624 - 98TH AVENUE N.	
City-St-Zip:	NAPLES, FL 34108	
Title:	D	( ) Delete
Name:	MANN, SHIRLEY	
Address:	1211 - 8TH TERR N	
City-St-Zip:	NAPLES, FL 34102	
Title:	PD	( ) Delete
Name:	BURGESON, FRANK	
Address:	5926 AMBERWOOD DR	
City-St-Zip:	NAPLES, FL 34110	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: TIMOTHY G. HAINS TD 02/16/2009
Electronic Signature of Signing Officer or Director — Date