

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 24, 2009  
Secretary of State**

DOCUMENT# 765238

Entity Name: NORTH MIAMI COMMUNITY CONCERT BAND, INC.

**Current Principal Place of Business:**

1590 NE 123 STREET  
NORTH MIAMI, FL 33161 US

**New Principal Place of Business:**

**Current Mailing Address:**

800 SOUTHWEST 131 AVENUE  
F-406  
PEMBROKE PINES, FL 33027 US

**New Mailing Address:**

FEI Number: 59-2255351      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

LERMAN, MELVIN S  
800 SOUTHWEST 131 AVENUE  
F-406  
PEMBROKE PINES, FL 33027 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: S ( ) Delete  
Name: WYNNE, JUDY  
Address: 291 BAY BAY DRIVE, #103  
City-St-Zip: BAL HARBOUR, FL 33154

Title: D ( ) Delete  
Name: KASS, FRANCES  
Address: 12240 NE 10 AVE  
City-St-Zip: NORTH MIAMI, FL 33161

Title: D ( ) Delete  
Name: SAUNDERS, HARVEY  
Address: 12700 SW 151 LANE  
City-St-Zip: MIAMI, FL 33186

Title: D ( ) Delete  
Name: BENNETT, BARLOW  
Address: 734 N CRESCENT DR.  
City-St-Zip: HOLLYWOOD, FL 33021

Title: D ( ) Delete  
Name: DREYER, FLO,  
Address: 21075 NE 34TH AVENUE #109  
City-St-Zip: AVENTURA, FL 33180

Title: T ( ) Delete  
Name: LERMAN, MELVIN S  
Address: 800 SOUTHWEST 131 AVENUE #F-406  
City-St-Zip: PEMBROKE PINES, FL 33027

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

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

Title: C (X) Change ( ) Addition  
Name: UNDERWOOD, AL  
Address: 5025 NE 5 AVE  
City-St-Zip: MIAMI, FL 33137

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: JUDY WYNNE

S

01/24/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date