

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005063

FILED  
Jan 04, 2008  
Secretary of State

**Entity Name:** SOUTHERN UNITED STATES PIPE BAND ASSOCIATION, INC.

**Current Principal Place of Business:**

162 KENSINGTON PARK DR.  
DAVENPORT, FL 33897

**New Principal Place of Business:**

**Current Mailing Address:**

162 KENSINGTON PARK DR.  
DAVENPORT, FL 33897

**New Mailing Address:**

**FEI Number:** 65-1119865

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LONGPHEE, MARGARET J TD  
162 KENSINGTON PARK DR.  
DAVENPORT, FL 33897 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: PD ( ) Delete  
Name: KEITH, SANDY PD  
Address: 1984 VALLEY DRIVE  
City-St-Zip: DUNEDIN, FL 34698

Title: VPD ( ) Delete  
Name: MCLAIN, STEVEN VPD  
Address: 2750 SE 151ST AVENUE  
City-St-Zip: MORRISTON, FL 32668

Title: VPD ( ) Delete  
Name: SIBEL, VINCE VPD  
Address: 1101 LANDINGS BLVD  
City-St-Zip: WEST PALM BEACH, FL 33413

Title: TD ( ) Delete  
Name: LONGPHEE, MARGARET TD  
Address: 162 KENSINGTON PARK DR.  
City-St-Zip: DAVENPORT, FL 33897

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

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

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

Title: VPD (X) Change ( ) Addition  
Name: ROSS, RICHARD VPD  
Address: 1213 WINDING CHASE DR  
City-St-Zip: WINTER SPRINGS, FL 32708

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: MARGARET J LONGPHEE

TD

01/04/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date