

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000005843

**FILED**  
**Apr 10, 2010**  
**Secretary of State**

**Entity Name:** MARCHING 100 ALUMNI BAND ASSOCIATION INCORPORATED

**Current Principal Place of Business:**

2377 EMERALD LOOP  
TALLAHASSEE, FL 32303

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 7133  
TALLAHASSEE, FL 32314

**New Mailing Address:**

**FEI Number:** 58-2633444

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MARTIN, AUBRONCEE  
4425 NW 44TH PLACE  
GAINESVILLE, FL 32606 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: PCD  
Name: GAINES, VICTOR  
Address: 2377 EMERALD RIDGE LOOP  
City-St-Zip: TALLAHASSEE, FL 32303

Title: VD  
Name: SPENCER, BRUCE  
Address: 2320 NORTH BROAD STREET 2ND FLOOR  
City-St-Zip: PHILADELPHIA, PA 19132

Title: TD  
Name: GRAHAM, KIAH  
Address: 2124 CLAREMONT LANE  
City-St-Zip: TALLAHASSEE, FL 32301

Title: VD  
Name: WHITE, TONY  
Address: 1155 S. BREVARD STREET  
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: SD  
Name: EVANS, KIMBERLY  
Address: 526 12TH AVENUE SOUTH  
City-St-Zip: ST. PETERSBURG, FL 33701

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: AUBRONCEE MARTIN

RA

04/10/2010

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

\_\_\_\_\_  
Date