## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000006281

FILED Apr 20, 2012 Secretary of State

Entity Name: WARRIOR BAND PARENT ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O BAND DIRECTOR 6425 MIAMI LAKEWAY NORTH MIAMI LAKES, FL 33014

Current Mailing Address: New Mailing Address:

C/O BAND DIRECTOR 6425 MIAMI LAKEWAY NORTH MIAMI LAKES, FL 33014

FEI Number: 65-0966615 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ORTIZ, FRANCES G
7350 MIAMI LAKEWAY SOUTH
MIAMI LAKES, FL, FL 33014 US
ORTIZ, FRANCES G
6425 MIAMI LAKEWAY NORTH
MIAMI LAKES, FL 33014 US

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: 04/20/2012

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: F

Name: ORTIZ, FRANCES G

Address: 6425 MIAMI LAKWAY NORTH City-St-Zip: MIAMI LAKES, FL 33014

Title: VP

Name: PEREZ, MADELINE

Address: 6425 MIAMI LAKEWAY NORTH

City-St-Zip: MIAMI, FL 33014

Title: T

Name: GONZALEZ, GLENDA
Address: 6425 MIAMI LAKEWAY NORTH
City-St-Zip: MIAMI LAKES, FL 33014

Title:

Name: SOLANA, SUSAN

Address: 6425 MIAMI LAKEWAY NORTH City-St-Zip: MIAMI LAKES, FL 33014

Title: PT

Name: PEREZ, MADELINE

Address: 6425 MIAMI LAKEWAY NORTH City-St-Zip: MIAMI LAKES, FL 33014

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: FRANCES G. ORTIZ P 04/20/2012