

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007773

FILED
Feb 03, 2010
Secretary of State

Entity Name: CLAY COUNTY COMMUNITY BAND, INC.

Current Principal Place of Business:

4445 WILBANKS AVENUE
PENNEY FARMS, FL 32077

New Principal Place of Business:

Current Mailing Address:

4445 WILBANKS AVENUE
PENNEY FARMS, FL 32077

New Mailing Address:

FEI Number: 59-3755221

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEPHENS, HELEN
4445 WILBANKS AVENUE
PENNEY FARMS, FL 32077 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: PRES
Name: STEPHENS, HELEN
Address: P.O. BOX 627
City-St-Zip: PENNEY FARMS, FL 32079

Title: VP
Name: HIERS, MICHAEL
Address: 220 OAK DRIVE SOUTH
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: SECT
Name: NELSON, KRISTEN
Address: 12169 MESA VERDE TRAIL
City-St-Zip: JACKSONVILLE, FL 32223

Title: TREA
Name: ROBERTSON, KATHLEEN
Address: 1692 BIG BRANCH RD
City-St-Zip: MIDDLEBURG, FL 32068

Title: CD
Name: BOYER, WALTER S
Address: 5512 JACKSON AVENUE
City-St-Zip: ORANGE PK, FL 32065

Title: MBR
Name: GILBERT, CLAIRE
Address: 2327 BIRDWOOD DR
City-St-Zip: ORANGE PARK, FL 32073

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: KATHLEEN Z ROBERTSON

TREA

02/03/2010

Electronic Signature of Signing Officer or Director

Date