

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000007424

**FILED**  
**May 07, 2004**  
**Secretary of State****Entity Name:** PIPER HIGH SCHOOL BAND PARENTS ASSOCIATION, INC.**Current Principal Place of Business:**8000 NW 44TH ST  
SUNRISE, FL 33351**New Principal Place of Business:****Current Mailing Address:**8000 NW 44TH ST  
SUNRISE, FL 33351**New Mailing Address:****FEI Number:** 43-1995043**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**ADAMS, KELLY D  
3743 NW 122 TERRACE  
SUNRISE, FL 33323 US**Name and Address of New Registered Agent:**ANGELONE, KRISTINA  
4340 NW 94TH TERRACE  
SUNRISE, FL 33351 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: KRISTINA ANGELONE

05/07/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: ADAMS, KELLY D  
Address: 3743 NW 122 TERRACE  
City-St-Zip: SUNRISE, FL 33323

Title: DV ( ) Delete  
Name: GRETZ, JILL R  
Address: 8031 NW 47 CT  
City-St-Zip: SUNRISE, FL 33351

Title: VD ( ) Delete  
Name: KAY, ELIZABETH  
Address: 11700 NW 30 PL  
City-St-Zip: SUNRISE, FL 33351

Title: DT ( ) Delete  
Name: COEY, SHERRY L  
Address: 5439 NW 59TH PLACE  
City-St-Zip: TAMARAC, FL 33319

Title: DV ( ) Delete  
Name: CAMEJO, LETICIA Y  
Address: 3570 NW 85 WAY, APT. 201  
City-St-Zip: SUNRISE, FL 33351

Title: DS (X) Delete  
Name: ANTHONY, BERNADETTE M  
Address: 8241 NW 52 STREET  
City-St-Zip: SUNRISE, FL 33351

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

Title: PD (X) Change ( ) Addition  
Name: ANGELONE, KRISTINA  
Address: 4340 NW 94TH TERRACE  
City-St-Zip: SUNRISE, FL 33351

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

Title: VD (X) Change ( ) Addition  
Name: HAMILTON, BETH  
Address: 6000 NW PARADISE PLACE  
City-St-Zip: TAMARAC, FL 33321

Title: DT (X) Change ( ) Addition  
Name: WELLS-SELBIG, ALISON  
Address: 4348 NW 129TH LANE  
City-St-Zip: SUNRISE, FL 33323

Title: DS (X) Change ( ) Addition  
Name: FRANKLIN, ELIZABETH  
Address: 8551 NW 46TH STREET  
City-St-Zip: LAUDERHILL, FL 33351

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KRISTINA ANGELONE

PD

05/07/2004

Electronic Signature of Signing Officer or Director

Date