

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004695

FILED
Apr 30, 2006
Secretary of State

Entity Name: MARCHING ALUMNI OF COOKMAN, INC.

Current Principal Place of Business:

2915 NW 206TH STREET
OPA LOCKA, FL 33056 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 473141
MIAMI, FL 33247 US

New Mailing Address:

1765 NW 89TH TERRACE
MIAMI, FL 33147 US

FEI Number: 58-2674067

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SNYDER, LAMONT
4270 NW 173RD DRIVE
MIAMI, FL 33055 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 () Delete
Name: WRIGHT, WANDA T
Address: 1765 NW 89TH TERRACE
City-St-Zip: MIAMI, FL 33147 US

Title: VP () Delete
Name: COLLINS, WILLIAM
Address: 2915 NW 206TH ST
City-St-Zip: OPA LOCKA, FL 33056 US

Title: SECR () Delete
Name: BIGGS, WILLIE A
Address: 351 NW 48TH STREET, APT A
City-St-Zip: MIAMI, FL 33127 US

Title: DIR () Delete
Name: MAYLOR, MOSES
Address: 5738-A SHANANDOAH WAY
City-St-Zip: ORLANDO, FL 37809 US

Title: DIR () Delete
Name: MCKENZIE, WILLIAM G
Address: 15800 NW 42ND AVENUE
City-St-Zip: MIAMI, FL 33054 US

Title: DIR () Delete
Name: POITIER, JAMES
Address: 640 DR. MARY MCLEOD BETHUNE BLVD
City-St-Zip: DAYTONA BEACH, FL 32114 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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City-St-Zip:

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

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 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: WANDA T WRIGHT

P

04/30/2006

Electronic Signature of Signing Officer or Director

Date