## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000004695

FILED Mar 25, 2009 Secretary of State

Entity Name: MARCHING ALUMNI OF COOKMAN, INC.

**Current Principal Place of Business: New Principal Place of Business:** 4270 NW 173RD DRIVE MIAMI, FL 33055 **Current Mailing Address: New Mailing Address:** 390 NW 30TH AVENUE FORT LAUDERDALE, FL 33311 US FEI Number: 58-2674067 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: SYNDER, LAMONT 4270 NW 173RD DRIVE MIAMI, FL 33055 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: **PRES** () Delete () Change () Addition HAWKINS-KING, TERRY F Name: Name: 390 NW 30TH AVENUE Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33311 US City-St-Zip: Title: Title: ( ) Delete () Change () Addition OSBORNE-WILLIAMS, RON C Name: Name: Address: 8490 SW 23RD COURT Address: City-St-Zip: MIRAMAR, FL 33025 US City-St-Zip: Title: SECR () Delete Title: () Change () Addition DAVIS-MILLS, YASMIN Name: Name: 2611 N OCEAN DRIVE #25 Address: Address: City-St-Zip: HOLLYWOOD, FL 33019 US City-St-Zip: Title: TREA ( ) Delete Title: () Change () Addition Name: SYNDER, LAMONT Name: Address: 4270 NW 173RD DRIVE Address: City-St-Zip: MIANI, FL 33055 US City-St-Zip: Title: DIR ( ) Delete Title: () Change () Addition MAYLOR, MOSES Name: Name: 5738-A SHANANDOAH WAY Address: Address: City-St-Zip: ORLANDO, FL 37809 US City-St-Zip: Title: () Delete Title: () Change () Addition POITIER, JAMES Name: Name: Address: 640 DR. MARY MCLEOD BETHUNE BLVD Address: DAYTONA BEACH, FL 32114 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: TERRY F. HAWKINS-KING PRES 03/25/2009