

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007272

FILED  
Jan 31, 2009  
Secretary of State

**Entity Name:** NEW SMYRNA BEACH BAND PARENTS ASSOCIATION, INC.

**Current Principal Place of Business:**

1015 TENTH STREET  
NEW SMYRNA BEACH, FL 32168 US

**New Principal Place of Business:**

**Current Mailing Address:**

1015 TENTH STREET  
NEW SMYRNA BEACH, FL 32168 US

**New Mailing Address:**

**FEI Number:** 59-3041343

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SULLIVAN, BRIAN  
1015 TENTH STREET  
NEW SMYRNA BEACH, FL 32168 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: D ( ) Delete  
Name: GRAU, PATRICIA  
Address: 526 N. RIVERSIDE DRIVE  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: D ( ) Delete  
Name: RATTCLIFFE, ANN  
Address: 1017 LAKE ASHBY ROAD  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: D ( ) Delete  
Name: KISCH, KELLY  
Address: 1100 WILLARD ST  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: D ( ) Delete  
Name: O'ROURKE, TINA  
Address: 290 PINE TREE DR  
City-St-Zip: EDGEWATER, FL 32141

Title: D ( ) Delete  
Name: EWING, KATHY  
Address: 2124 VILLA WAY  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

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

Title: D (X) Change ( ) Addition  
Name: EWING, KATHLEEN  
Address: 2124 VILLA WAY  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: D (X) Change ( ) Addition  
Name: VINCENT, JACK  
Address: 128 HAZELWOOD RIVER RD  
City-St-Zip: EDGEWATER, FL 32141

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

Title: D (X) Change ( ) Addition  
Name: O'ROURKE, TINA  
Address: 2909 PINE TREE DR  
City-St-Zip: EDGEWATER, FL 32141

Title: D (X) Change ( ) Addition  
Name: KAYAT, JEAN  
Address: 1505 S. RIVERSIDE DR  
City-St-Zip: EDGEWATER, FL 32141

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: TINA T O'ROURKE

D

01/31/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date