

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001232

FILED  
Sep 07, 2005  
Secretary of State

**Entity Name:** FLORIDA STORM DRUM AND BUGLE CORPS, INC.

**Current Principal Place of Business:**

PO BOX 121401  
CLERMONT, FL 34711 US

**New Principal Place of Business:**

15801 MARSH ELDER ST.  
CLERMONT, FL 34711 US

**Current Mailing Address:**

PO BOX 121401  
CLERMONT, FL 34711 US

**New Mailing Address:**

PO BOX 271  
CENTER HILL, FL 33514 US

**FEI Number:** 20-2955554 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

LOWERY, CORY J  
1601 JOHNS LAKE ROAD  
APT.212  
CLERMONT, FL 34711 US

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

LOWERY, CORY J  
1839 PEARWOOD CT.  
ORLANDO, FL 32818 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: CORY J LOWERY

09/07/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: P ( ) Change (X) Addition  
Name: LOWERY, CORY J MR.  
Address: 1839 PEARWOOD CT.  
City-St-Zip: ORLANDO, FL 32818 US

Title: V ( ) Change (X) Addition  
Name: WRIGHT, RYAN F MR.  
Address: 15801 MARSH ELDER ST.  
City-St-Zip: CLERMONT, FL 34711 US

Title: S,T ( ) Change (X) Addition  
Name: OLSEN, MICHAEL A MR.  
Address: PO BOX 271  
City-St-Zip: CENTER HILL, FL 33514 US

Title: D ( ) Change (X) Addition  
Name: BATES, STEPHEN R MR.  
Address: 703 APRICOT DR.  
City-St-Zip: OCOEE, FL 34761 US

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: MICHAEL A. OLSEN

S,T

09/07/2005

Electronic Signature of Signing Officer or Director

Date