

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003066

FILED
Apr 30, 2009
Secretary of State

Entity Name: CITY OF DUNEDIN PIPE BAND, INC.

Current Principal Place of Business:

1920 PINEHURST ROAD
DUNEDIN, FL 34698

New Principal Place of Business:

Current Mailing Address:

PO BOX 452
DUNEDIN, FL 346970452

New Mailing Address:

FEI Number: 20-2473999

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEITH, ALEXANDER
1984 VALLEY DR
DUNEDIN, FL 34698 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: KEITH, ALEXANDER
Address: PO BOX 452
City-St-Zip: DUNEDIN, FL 346970452

Title: P () Delete
Name: STREET, CHARLES
Address: PO BOX 452
City-St-Zip: DUNEDIN, FL 346970452

Title: V () Delete
Name: EVERETT, JAMES
Address: PO BOX 452
City-St-Zip: DUNEDIN, FL 346970452

Title: S () Delete
Name: KOKORIS, DANETTE
Address: PO BOX 452
City-St-Zip: DUNEDIN, FL 346970452

Title: T () Delete
Name: HAMILTON, BONNIE
Address: PO BOX 452
City-St-Zip: DUNEDIN, FL 346970452

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: ABRAMS, RICK
Address: PO BOX 452
City-St-Zip: DUNEDIN, FL 346970452

Title: VP (X) Change () Addition
Name: EVERETT, JAMES
Address: PO BOX 452
City-St-Zip: DUNEDIN, FL 346970452

Title: S (X) Change () Addition
Name: DUBOCK, DANA
Address: PO BOX 452
City-St-Zip: DUNEDIN, FL 346970452

Title: T (X) Change () Addition
Name: DOYLE, CARL
Address: PO BOX 452
City-St-Zip: DUNEDIN, FL 346970452

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: CARL DOYLE

T

04/30/2009

Electronic Signature of Signing Officer or Director

Date