## 2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N05000004691

FILED May 14, 2008 Secretary of State

Entity Name: PIRATE BAND PATRONS ASSOCIATION, INC.

**Current Principal Place of Business:** 

**New Principal Place of Business:** 

ROBERT MORGAN EDUCATIONAL CENTER C/O BAND ROOM - 18180 SW 122 AVENUE

MIAMI, FL 33177

**Current Mailing Address:** 

**New Mailing Address:** 

ROBERT MORGAN EDUCATIONAL CENTER C/O BAND ROOM - 18180 SW 122 AVENUE

MIAMI, FL 33177

FEI Number: 56-2439986 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:

HURTADO, LISA BEDSWORTH, CAROL 15241 SW 153 ST. 8255 SW 94 ST. MIAMI, FL 33187 US MIAMI, FL 33156 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: CAROL BEDSWORTH

05/14/2008

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete HURTADO, LISA Name: 15241 SW 158 ST Address: City-St-Zip: MIAMI, FL 33187

Title: SD ( ) Delete BEDSWORTH, CAROL Name: Address: 8255 SW 94 ST. City-St-Zip: MIAMI, FL 33156

Title: () Delete JONES, ALICIA Name: 15480 SW 153 COURT Address: City-St-Zip: MIAMI, FL 33187

Title: TD ( ) Delete CARNERO, ANNIE Name: Address: 15440 SW 158 ST. City-St-Zip: MIAMI, FL 33187

(X) Change ( ) Addition

BEDSWORTH, CAROL Name: Address: 8255 SW 94 ST. City-St-Zip: MIAMI, FL 33156

Title: (X) Change ( ) Addition

Name: BELISARIO, ESPERANZA Address: 15411 SW 159 ST. City-St-Zip: MIAMI, FL 33187

Title: (X) Change ( ) Addition

CARNERO, ANNIE Name: Address: 15440 SW 158 ST. City-St-Zip: MIAMI, FL 33187

Title: (X) Change ( ) Addition

Name: ARBELAEZ, PATRICIA Address: 10908 SW 72 ST. UNIT 216.

City-St-Zip: MIAMI, FL 33173

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: CAROL BEDSWORTH PD