

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000314

FILED  
Apr 28, 2007  
Secretary of State

Entity Name: BROWARD COUNTY BAND DIRECTORS INC

## Current Principal Place of Business:

1750 NE 14TH ST  
FT LAUDERDALE, FL 33304

## New Principal Place of Business:

12500 W. SAMPLE RD  
CORAL SPRINGS, FL 33065

## Current Mailing Address:

1750 NE 14TH ST  
FT LAUDERDALE, FL 33304

## New Mailing Address:

12500 W. SAMP;E RD.  
CORAL SPRINGS, FL 33065

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

A1A REGISTERED AGENT INC.  
92 SADBERRY RD  
QUINCY, FL 32351 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: COLLIER, GARY  
Address: 1750 NE 14TH ST  
City-St-Zip: FT LAUDERDALE, FL 33304

Title: D ( ) Delete  
Name: CURRY, HESTON  
Address: 6501 HOLLYWOOD BLVD  
City-St-Zip: HOLLYWOOD, FL 33024

Title: D ( ) Delete  
Name: HAMMOND, JAMES  
Address: 4333 SOL PRESS BLVD  
City-St-Zip: COCNUT CREEK, FL 33073

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: HELMS, RON  
Address: 12500  
City-St-Zip: CORAL SPRINGS, FL 33065

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

Title: D (X) Change ( ) Addition  
Name: HARRISON, JORDAN  
Address: 5050 WILES RD  
City-St-Zip: COCNUT CREEK, FL 33073

Title: D ( ) Change (X) Addition  
Name: COLLIER, GARY  
Address: 3400 WILDCAT WAY  
City-St-Zip: MIRAMAR, FL 33023

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: GARY D. COLLIER

D

04/28/2007

Electronic Signature of Signing Officer or Director

Date