

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012220

FILED
Jul 01, 2008
Secretary of State

Entity Name: FT. MEADE FIGHTING MINER BAND PARENT ASSOCIATION, INC

Current Principal Place of Business:

700 N EDGEWOOD DRIVE
FT. MEADE, FL 33841

New Principal Place of Business:

Current Mailing Address:

P O BOX 668
FT. MEADE, FL 33841

New Mailing Address:

FEI Number: 56-2654204 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

SMITH, NELL
700 N EDGEWOOD DRIVE
FT. MEADE, FL 33841 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: DP () Delete
Name: SMITH, NELL
Address: 1390 PARRISH ROAD
City-St-Zip: FT. MEADE, FL 33841

Title: DT () Delete
Name: SMITH, RUTH
Address: 1175 SAND MOUNTAIN ROAD
City-St-Zip: FT. MEADE, FL 33841

Title: DS () Delete
Name: PERRY, PRISCILLA
Address: 3975 OLD BOWLING GREEN ROAD
City-St-Zip: FT. MEADE, FL 33841

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: DVP () Change (X) Addition
Name: PERRY, CHARLES
Address: 3975 OLD BOWLING GREEN ROAD
City-St-Zip: FORT MEADE, FL 33941

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: NELL P. SMITH

PRES

07/01/2008

Electronic Signature of Signing Officer or Director

Date