

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002869

FILED
May 23, 2009
Secretary of State

Entity Name: BONITA SPRINGS CONCERT BAND INC.

Current Principal Place of Business:

3550 QUILL LEAF COURT
BONITA SPRINGS, FL 34134

New Principal Place of Business:

Current Mailing Address:

3550 QUILL LEAF COURT
BONITA SPRINGS, FL 34134

New Mailing Address:

FEI Number: 26-2505389 **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:

Name and Address of New Registered Agent:

DATI, JAMES D
BOND SCHOENECK & KING PA
4001 TAMiami TRAIL NORTH SUITE 250
NAPLES, FL 34103 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SCHRAFF, SYLVIA H
Address: 3550 QUILL LEAF COURT
City-St-Zip: BONITA SPRINGS, FL 34134

Title: V () Delete
Name: REISENFELD, HAROLD S
Address: 22311 FAIRWAY BEND
City-St-Zip: BONITA SPRINGS, FL 34135

Title: T () Delete
Name: RICHARDSON, DWIGHT
Address: 725 101ST AVE
City-St-Zip: N NAPLES, FL 34108

Title: D () Delete
Name: COOPER, HAROLD
Address: 11625 N CAROLINA DR
City-St-Zip: BONITA SPRINGS, FL 34135

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

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: DWIGHT E. RICHARDSON

T

05/23/2009

Electronic Signature of Signing Officer or Director

Date