

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19399

FILED
Feb 21, 2009
Secretary of State

Entity Name: TALLAHASSEE PIPE BAND, INC.

Current Principal Place of Business:

C/O JOE ASHCRAFT
14126 RED HAWK RD
TALLAHASSEE, FL 32312

New Principal Place of Business:

Current Mailing Address:

C/O JOE ASHCRAFT
14126 RED HAWK RD
TALLAHASSEE, FL 32312

New Mailing Address:

FEI Number: 65-0042229

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ASHCRAFT, JOE
14126 RED HAWK RD
TALLAHASSEE, FL 32312 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: ASHCRAFT, JOE
Address: 14126 RED HAWK RD
City-St-Zip: TALLAHASSEE, FL 32312 US

Title: S () Delete
Name: PAUL, SUZANNE
Address: 2126 TRECOTT DR
City-St-Zip: TALLAHASSEE, FL 32308 US

Title: Q () Delete
Name: SANDSTRUM, JOHN
Address: 3129 SHAMROCK E
City-St-Zip: TALLAHASSEE, FL 32309 US

Title: BM () Delete
Name: DEWAR, BILL
Address: 2359 FOXBORO WAY
City-St-Zip: TALLAHASSEE, FL 32309 US

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: JOE ASHCRAFT

D

02/21/2009

Electronic Signature of Signing Officer or Director

Date