

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21729

FILED
Jan 19, 2012
Secretary of State

Entity Name: FLORIDA BANDMASTERS ASSOCIATION, INCORPORATED

Current Principal Place of Business:

1661 GOLFVIEW DR E
PEMBROKE PINES, FL 33026

New Principal Place of Business:

Current Mailing Address:

PO BOX 840135
PEMBROKE PINES, FL 33084

New Mailing Address:

FEI Number: 59-2318742

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JENKINS, NEIL E
1661 GOLFVIEW DR E
PEMBROKE PINES, FL 33026 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: P
Name: FOLSOM, RANDY
Address: 472 PARISH BLVD
City-St-Zip: MARY ESTHER, FL 32569

Title: PP
Name: SPREEN, MARK
Address: 4844 MARIGOLD PL
City-St-Zip: SARASOTA, FL 34231

Title: PE
Name: DAVENPORT, RICHARD
Address: 3849 HIGHWAY 273
City-St-Zip: GRACEVILLE, FL 32440

Title: ED
Name: JENKINS, NEIL E
Address: 1661 GOLFVIEW DRIVE EAST
City-St-Zip: PEMBROKE PINES, FL 33026

Title: D
Name: BARAT, SHAWN
Address: 1258 WINDY WILLOWS DRIVE
City-St-Zip: JACKSONVILLE, FL 32225

Title: PE-D
Name: MANN, LINDA
Address: 1039 NE 16TH TERRACE
City-St-Zip: CAPE CORAL, FL 33909

I hereby 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 all other like empowered.

SIGNATURE: NEIL E. JENKINS

ED

01/19/2012

Electronic Signature of Signing Officer or Director

Date