

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37770

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: THE POLICE PIPE & DRUM CORPS OF FLORIDA, INC.

**Current Principal Place of Business:**

P. O. BOX 450814  
SUNRISE, FL 33345

**New Principal Place of Business:**

**Current Mailing Address:**

11300 NW 32ND PL  
SUNRISE, FL 33323

**New Mailing Address:**

FEI Number: 65-0190917      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

AGNEW, EDWARD  
11300 NW 32ND PLACE  
SUNRISE, FL 33323      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: T      ( ) Delete  
Name: HANSTEIN, COLLEEN J  
Address: 8016 SW 81ST WAY  
City-St-Zip: DAVIE, FL 33324

Title: S      ( ) Delete  
Name: LINDA, AGNEW  
Address: 11300 NW 32 PL  
City-St-Zip: SUNRISE, FL 33323

Title: V      ( ) Delete  
Name: MINIERI, TOM  
Address: 9354 NW 53 CT  
City-St-Zip: SUNRISE, FL 33351

Title: P      ( ) Delete  
Name: KING, RICHARD  
Address: 3321NE18ST  
City-St-Zip: FT LAUDERDALE, FL 33305

Title: D      ( ) Delete  
Name: AGNEW, EDWARD A  
Address: 11300 NW 32 PL  
City-St-Zip: SUNRISE, FL 33323

Title: D      ( ) Delete  
Name: MCGILLIGUDDY, KEVIN  
Address: 7647 ROCKPORT CIRCLE  
City-St-Zip: LAKE WORTH, FL 33467

**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: P      (X) Change ( ) Addition  
Name: DUNN, KIETH  
Address: 1301 SW 128 DR  
City-St-Zip: DAVIE, FL 33325

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: EDWARD AGNEW

D

04/29/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date