

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 29, 2004
Secretary of State**

DOCUMENT# N92000000797

Entity Name: THE SAINT ANDREWS PIPE BAND OF MIAMI, INC.

Current Principal Place of Business:

60 N.E. 104TH STREET
MIAMI SHORES, FL 33138

New Principal Place of Business:

1301 NW 99TH AVENUE
PLANTATION, FL 33322

Current Mailing Address:

60 N.E. 104TH STREET
MIAMI SHORES, FL 33138

New Mailing Address:

1301 NW 99TH AVENUE
PLANTATION, FL 33322

FEI Number: 65-0387984

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACDONALD, NIGEL M
60 N.E. 104TH STREET
MIAMI SHORES, FL 33138 US

Name and Address of New Registered Agent:

MACDONALD, NIGEL M
1301 NW 99TH AVENUE
PLANTATION, FL 33322 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:

01/29/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MACDONALD, NIGEL
Address: 1301 N.W. 99 AVENUE
City-St-Zip: PLANTATION, FL 33322

Title: TD () Delete
Name: BORDEN, CLIFFORD
Address: 1002 N.E. 117TH STREET
City-St-Zip: BISCAYNE PARK, FL 33161

Title: SD () Delete
Name: CINTRON, BONNIE
Address: 1770 LEWIS ROAD
City-St-Zip: MIAMI LAKES, FL 33014

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: NIGEL MACDONALD

PD

01/29/2004

Electronic Signature of Signing Officer or Director

Date