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Secretary of State

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**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N93000002899

1. Corporation Name

THE FLORIDA CONCERT BAND, INC.

174475 - 90073 - 12

Principal Place of Business

8879 SE HAWKS BILL WAY
HOBE SOUND FL 33475
US

Mailing Address

P O BOX 8395
HOBE SOUND FL 33475
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

06/28/1993

4. FEI Number

65-0437465

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

BLAHUN, GEORGE
8879 SE HAWKS BILL WAY
HOBE SOUND FL 33475

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

George Blahun
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2/12/99

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **BLAHUN, GEORGE**
STREET ADDRESS **8879 SE HAWKS BILL WAY**
CITY-ST-ZIP **HOBE SOUND FL 33455**

TITLE ☐ DELETE

NAME **KNECHT, STEVE**
STREET ADDRESS **8420 S E CROFT CIR**
CITY-ST-ZIP **HOBE SOUND FL 33455**

TITLE ☐ DELETE

NAME **FLANAGAN, JOSEPH**
STREET ADDRESS **315 INDIAN GROVE DR**
CITY-ST-ZIP **STUART FL 34994**

TITLE ☐ DELETE

NAME **FOX, B M**
STREET ADDRESS **150 WOODBRIDGE RD**
CITY-ST-ZIP **PALM BEACH FL 33480**

TITLE ☐ DELETE

NAME **FREDRICK, ROBT**
STREET ADDRESS **150 WOODBRIDGE RD**
CITY-ST-ZIP **PALM BEACH FL 33480**

TITLE ☐ DELETE

NAME **SHORE, C M**
STREET ADDRESS **7498 SE BAY CEDAR CIR**
CITY-ST-ZIP **HOBE SOUND FL 33455**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

George Blahun
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/12/99 6561546-9999
Date Daytime Phone #

CR2E037 (1/1/98)