

**2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Jun 24, 2011**  
**Secretary of State**

DOCUMENT# N93000004615

**Entity Name:** COOPER CITY HIGH SCHOOL BAND PARENTS' ASSOCIATION, INC.**Current Principal Place of Business:**9401 STIRLING RD  
COOPER CITY, FL 33328**New Principal Place of Business:****Current Mailing Address:**PO BOX 848635  
PEMBROKE PINES, FL 33084**New Mailing Address:****FEI Number:** 59-2583208**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**SCHLETTER, CHRISTOPHER J  
9401 STIRLING RD  
COOPER CITY, FL 33328 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: PD  
Name: BERLINSKY, STANTON  
Address: 5661 SW 99TH LN  
City-St-Zip: COOPER CITY, FL 333285721

Title: VPD  
Name: NARDIN, ARTHUR M III  
Address: PO BOX 848634  
City-St-Zip: PEMBROKE PINES, FL 33084

Title: VPD  
Name: POLLOCK, KAREN  
Address: 9401 STIRLING RD  
City-St-Zip: COOPER CITY, FL 33328

Title: TD  
Name: SATTERFIELD, NICKI  
Address: PO BOX 848634  
City-St-Zip: PEMBROKE PINES, FL 33084

Title: SD  
Name: DORON, ELIZABETH A  
Address: PO BOX 848634  
City-St-Zip: PEMBROKE PINES, FL 33084

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: STANTON BERLINSKY

PD

06/24/2011

Electronic Signature of Signing Officer or Director

Date