

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

97 OCT -6 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N96000001660 (7)

1. Corporation Name

THE UNIVERSITY CITY PIPE BAND, INC.

Principal Place of Business

Mailing Address

1001 NW 98TH STREET
GAINESVILLE FL 32606

ROUTE 2, BOX 955
MICANOPY FL 32667

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
03/22/1996

3a. Date of Last Report
3/22/96

2. Principal Place of Business
21 Presbyterian Student Center
Suite, Apt. #, etc.
22 1402 W. University Ave.
City & State
23 Gainesville FL
Zip
24 32603
Country
25 USA

2a. Mailing Address
26 P.O. Box 143103
Suite, Apt. #, etc.
27
City & State
28 Gainesville FL
Zip
29 32614
Country
30 USA

4. FEI Number
59-33606591

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

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

OSBORNE, BRENDA
ROUTE 2, BOX 955
MICANOPY FL 32667

81 Name Jennifer Adam
82 Street Address (P.O. Box Number is Not Acceptable)
2337 SW Archer Rd #104
83
84 City Gainesville FL 85 Zip Code 32608

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 Jennifer Adam - Treasurer

9/23/97

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	Drum Sargeant	☒ DELETE
NAME	Allen Schroeter	
STREET ADDRESS	Hwy 26	
CITY-ST-ZIP	Trenton FL 32693	
TITLE	Pipe Sargeant	☒ DELETE
NAME	Alexander Gray	
STREET ADDRESS	Hwy 26	
CITY-ST-ZIP	Trenton FL 32693	
TITLE	Pipe Sargeant	☒ DELETE
NAME	Hans Laurisen	
STREET ADDRESS	1111 SW 116th Ave #92	
CITY-ST-ZIP	Gainesville FL 32601	
TITLE		☐ DELETE
NAME	100002315291--0	
STREET ADDRESS	-10/08/97--01094--002	
CITY-ST-ZIP	*****70.00 *****70.00	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Pipe Major - Director	☒ Change ☐ Addition
1.2 NAME	Jeffrey Anderson	
1.3 STREET ADDRESS	811 SW 58th Terr	
1.4 CITY-ST-ZIP	Gainesville FL 32607	
2.1 TITLE	Pipe Sargeant - Director	☐ Change ☒ Addition
2.2 NAME	Julie Wong	
2.3 STREET ADDRESS	811 SW 58th Terr	
2.4 CITY-ST-ZIP	Gainesville FL 32607	
3.1 TITLE	Treasurer	☒ Change ☐ Addition
3.2 NAME	Jennifer Adam	
3.3 STREET ADDRESS	2337 SW Archer Rd #104	
3.4 CITY-ST-ZIP	Gainesville FL 32608	
4.1 TITLE	Quarter Master	☐ Change ☒ Addition
4.2 NAME	Michael Paige	
4.3 STREET ADDRESS	117 E. 11th Rd #21	
4.4 CITY-ST-ZIP	Neurose, FL 32666	
5.1 TITLE	Drum Sargeant - Director	☐ Change ☒ Addition
5.2 NAME	Laura Bennett	
5.3 STREET ADDRESS	2600 Bayshore Blvd	
5.4 CITY-ST-ZIP	Dunedin FL 34108	
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do 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.

SIGNATURE Jennifer Adam REQUIRED

9/23/97

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CR2E037 (4/97)

Pg. 2 of 2

9.23.97

To: Division of Corporations
From: Jennifer Adam Treasurer, UCPB

We originally mailed our filing 4/23/97 with check number 186 for \$61.25. That check has never cleared. Unfortunately the girl who is listed as our registered agent is no longer our registered agent. I did not receive the notice in a timely fashion. When I called I was told to write a letter of explanation and send all this in together. If there is a problem please contact me at 352-378-3345.

Thank you,

Jennifer L. Adam
Treasurer
University City Pipe Band, Inc.