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Feb 12 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N96000001660 (7)**

1. Corporation Name

**THE UNIVERSITY CITY PIPE BAND, INC.**

Principal Place of Business

Mailing Address

**PRESBYTERAN STUDENT CENTER  
1402 W. UNIVERSITY AVE.  
GAINESVILLE FL 32603**

**P.O. BOX 143103  
GAINESVILLE FL 32614**



3. Date Incorporated or Qualified

**03/22/1996**

4. FEI Number

**59-3366591**

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

5. Certificate of Status Desired ☒

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00 May Be  
Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

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

**ADAM, JENNIFER  
2337 S.W. ARCHER RD., #104  
GAINESVILLE FL 32608**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE  
NAME **PMD**  
STREET ADDRESS **ANDERSON, JEFFREY**  
CITY-ST-ZIP **811 S.W. 58TH TERRACE**  
**GAINESVILLE FL 32607**

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME **PSD**  
STREET ADDRESS **WONG, JULIE**  
CITY-ST-ZIP **811 S.W. 58TH TERRACE**  
**GAINESVILLE FL 32607**

2.1 TITLE ☒ Change ☐ Addition  
2.2 NAME **PSZD**  
2.3 STREET ADDRESS **WONG, JULIE**  
2.4 CITY-ST-ZIP **Same**

TITLE ☐ DELETE  
NAME **T**  
STREET ADDRESS **ADAM, JENNIFER**  
CITY-ST-ZIP **2337 S.W. ARCHER RD., #104**  
**GAINESVILLE FL 32608**

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE ☒ DELETE  
NAME **QM**  
STREET ADDRESS **PAIGE, MICHAEL**  
CITY-ST-ZIP **117 ELIAM RD., #21**  
**MELROSE FL 32666**

4.1 TITLE ☒ Change ☒ Addition  
4.2 NAME **QM**  
4.3 STREET ADDRESS **SARAH PAIGE**  
4.4 CITY-ST-ZIP **5510 NE CR 219A LOT 2**  
**MELROSE, FL 32666**

TITLE ☒ DELETE  
NAME **DSD**  
STREET ADDRESS **BENNETT, LAURA**  
CITY-ST-ZIP **2680 BAYSHORE BLVD.**  
**DUNEDIN FL 34698**

5.1 TITLE ☐ Change ☒ Addition  
5.2 NAME **DSD**  
5.3 STREET ADDRESS **MICHAEL PAIGE**  
5.4 CITY-ST-ZIP **5510 NE CR 219A LOT 2**  
**MELROSE, FL 32666**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☒ Addition  
6.2 NAME **PSD**  
6.3 STREET ADDRESS **KATHY GARLOCK**  
6.4 CITY-ST-ZIP **6205 WEST PINEDALE CIRCLE**  
**CRYSTAL RIVER, FL 34429**

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: Jeffrey B. Anderson **JEFFREY B. ANDERSON** 1/5/98 (352) 379-1791

CR2E037 (1097)