

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005682

FILED
Feb 24, 2005
Secretary of State

Entity Name: THE ST. PETERSBURG COMMUNITY BAND, INC.

Current Principal Place of Business:

4540 54 AVE N
ST PETERSBURG, FL 33714

New Principal Place of Business:

Current Mailing Address:

4540 54 AVE N
ST PETERSBURG, FL 33714

New Mailing Address:

FEI Number: 59-3536205

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLSON, STEWART O
100 FAREHAM PLACE N
SAINT PETERSBURG, FL 337012967 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: D () Delete
Name: VELAZQUEZ, INDIOL
Address: 545 59 ST S
City-St-Zip: ST PETERSBURG, FL 33707

Title: D () Delete
Name: ATAMIAN, PEG
Address: 4540 54 AVE N
City-St-Zip: ST PETERSBURG, FL 33714

Title: D () Delete
Name: BUCCELLATO, PETER
Address: 13851 102 AVE N
City-St-Zip: ST PETERSBURG, FL 33774

Title: D () Delete
Name: BINHAM, SUSAN
Address: 3100 61 LANE N
City-St-Zip: LARGO, FL 33710

Title: D () Delete
Name: OLSON, STEWART O
Address: 100 FAREHAM PL N
City-St-Zip: ST PETERSBURG, FL 33701

Title: DP () Delete
Name: OLSON, STEWART O
Address: 100 FAREHAM PLACE N
City-St-Zip: SAINT PETERSBURG, FL 337012967

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: TONEY, ARNOLD
Address: 96 THATCH PALM ST. EAST
City-St-Zip: LARGO, FL 33770

Title: DST (X) Change () Addition
Name: ATAMIAN, PEG
Address: 4540 54 AVE N
City-St-Zip: ST PETERSBURG, FL 33714

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DVP (X) Change () Addition
Name: WINSLOW, ROSEMARY
Address: 3933 BENSON AVE. N.
City-St-Zip: ST PETERSBURG, FL 33713

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: STEWART O. OLSON

DP

02/24/2005

Electronic Signature of Signing Officer or Director

Date