

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19399

Entity Name: TALLAHASSEE PIPE BAND, INC.**Current Principal Place of Business:**C/O JOE ASHCRAFT
14126 RED HAWK RD
TALLAHASSEE, FL 32312**Current Mailing Address:**C/O JOE ASHCRAFT
14126 RED HAWK RD
TALLAHASSEE, FL 32312 20**FEI Number:** 65-0042229**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ASHCRAFT, JOE
14126 RED HAWK RD
TALLAHASSEE, FL 32312 US*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**Officer/Director Detail :**

Title	DIRECTOR
Name	BAILEY, MICHAEL
Address	229 SINCLAIR RD.
City-State-Zip:	TALLAHASSEE FL 32312

Title	SECRETARY
Name	OLNEY, KATHY
Address	229 SINCLAIR RD
City-State-Zip:	TALLAHASSEE FL 32312

Title	Q
Name	SANDSTRUM, JOHN
Address	3129 SHAMROCK E
City-State-Zip:	TALLAHASSEE FL 32309

Title	BM
Name	DEWAR, BILL
Address	2359 FOXBORO WAY
City-State-Zip:	TALLAHASSEE FL 32309

Title	TREASURER
Name	ASHCRAFT, JOSEPH CROCKETT
Address	C/O JOE ASHCRAFT 14126 RED HAWK RD
City-State-Zip:	TALLAHASSEE FL 32312

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: JOSEPH C. ASHCRAFT**TREASURER****01/25/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date