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.

MANAGER

SIGNATURE: EFSTRATIOS LAGOUTARIS

Electronic Signature of Registered Agent

Officer/Director Detail :			
Title	PRES	Title	VP
Name	LAWLESS, SAMUEL	Name	MCWILLIAM, IAIN
Address	5351 CYPRESS LINKS	Address	3801-1 PADDLEWHEEL
City-State-Zip:	ELKTON FL 32033	City-State-Zip:	JACKSONVILLE FL 32257
Title	TRES	Title	SEC
Name	SHIRES, WILLIAM	Name	LAGOUTARIS, EFSTRATIOS
Address	2921 GRANDE OAKS WAY	Address	478 PALISADE DRIVE
City-State-Zip:	FLEMING ISLAND FL 32003	City-State-Zip:	SAINT AUGUSTINE FL 32092

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:

Name and Address of Current Registered Agent:

LAGOUTARIS, EFSTRATIOS 478 PALISADE DRIVE SAINT AUGUSTINE, FL 32092 US

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N2100009880

Entity Name: CITY OF ST. AUGUSTINE PIPE BAND, INC.

Current Principal Place of Business:

478 PALISADE DRIVE SAINT AUGUSTINE, FL 32092

Current Mailing Address:

478 PALISADE DRIVE SAINT AUGUSTINE. FL 32092

FEI Number: 87-2408649

Certificate of Status Desired: No

Date

04/21/2022

Date

FILED Apr 21, 2022 Secretary of State 4147195643CC

Electronic Signature of Signing Officer/Director Detail