

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 720119

FILED
Apr 30, 2002 8:00 AM
Secretary of State

Entity Name: GASPARILLA FESTIVAL OF THE ARTS, INC.

Current Principal Place of Business:

P.O. BOX 10591
TAMPA, FL 33679

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 10591
TAMPA, FL 33679

New Mailing Address:

FEI Number: 23-7112792

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PANZARELLA, JOHN F
101 E. KENNEDY BLVD
SUITE 2700, POBOX 1102
TAMPA, FL 33602 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: PD () Delete
Name: PANZARELLA, JOHN
Address: 101 E. KENNEDY BLVD, SUITE 2700, POBX 1102
City-St-Zip: TAMPA, FL 33602 US

Title: TD () Delete
Name: STORM, KELLY
Address: 1913 DEKLE AVE
City-St-Zip: TAMPA, FL 33606 US

Title: VD () Delete
Name: MEYER, GEOFF
Address: 808 S EDISON AVENUE
City-St-Zip: TAMPA, FL 33606

Title: SD () Delete
Name: VOORHIS, JILL
Address: 2390 26TH AVENUE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33713

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MEYER, GEOFF
Address: 808 S. EDISON AVENUE
City-St-Zip: TAMPA, FL 33606 US

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

Title: VD (X) Change () Addition
Name: ELLIS, JONATHAN
Address: 100 N. TAMPA ST., SUITE 3500
City-St-Zip: TAMPA, FL 33602

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: KELLY STORM

TD

04/30/2002

Electronic Signature of Signing Officer or Director

Date