

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002528

FILED
Jan 05, 2004
Secretary of State

Entity Name: VENICE, FLORIDA, CHAPTER OF THE SOCIETY FOR THE PRESERVATION AND ENCOURAGEMENT OF THE BARBER SHOP QUARTET SINGING IA AMERICA, INC.

Current Principal Place of Business:

1226 WATERSIDE LN
VENICE, FL 34292

New Principal Place of Business:

1226 WATERSIDE LN
VENICE, FL 34285

Current Mailing Address:

1226 WATERSIDE LN
VENICE, FL 34292

New Mailing Address:

1226 WATERSIDE LN
VENICE, FL 34285

FEI Number: 26-0059889

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OCONNOR, ROBERT F
1226 WATERSIDE LN
VENICE, FL 34292

Name and Address of New Registered Agent:

OCONNOR, ROBERT F
1226 WATERSIDE LN
VENICE, FL 34285

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:

01/05/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BASHAM, PAUL E
Address: 1599 VERMEER DR
City-St-Zip: NOKOMIS, FL 34275

Title: SD () Delete
Name: OCONNOR, ROBERT F
Address: 1226 WATERSIDE LN
City-St-Zip: VENICE, FL 34292

Title: TD () Delete
Name: TRUMPY, ROBERT C
Address: 2111 TIMUCLIA TERR
City-St-Zip: NOKOMIS, FL 34275

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: ROBERT F. O'CONNOR

SD

01/05/2004

Electronic Signature of Signing Officer or Director

Date