

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 25, 2002 8:00 am**  
**Secretary of State**

02-25-2002 90083 006 \*\*\*150.00

**DOCUMENT # N14767**

1. Entity Name

**GUILD FOR INTERNATIONAL PIANO COMPETITIONS, INCORPORATED**

Principal Place of Business

Mailing Address

**3639 PASEO NAVARRA  
 WEST PALM BEACH FL 33405**

**PO BOX 6845  
 WEST PALM BEACH FL 33405**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-2670372**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FINLEY, CHANDLER  
 1645 PALM BEACH LAKES #300  
 WEST PALM BEACH FL 33401**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: **PD**  Delete  
 NAME: **BRYAN, JOHN**  
 STREET ADDRESS: **3639 PASSEO NAVARRA**  
 CITY-ST-ZIP: **W PALM BCH FL**

TITLE:  Change  Addition  
 NAME:  Change  Addition  
 STREET ADDRESS:  Change  Addition  
 CITY-ST-ZIP:  Change  Addition

TITLE: **VPSD**  Delete  
 NAME: **DEVAJAY, ADELBERT**  
 STREET ADDRESS: **3100 SPRINGDALE E216**  
 CITY-ST-ZIP: **PALM SPRINGS FL 33461**

TITLE:  Change  Addition  
 NAME:  Change  Addition  
 STREET ADDRESS:  Change  Addition  
 CITY-ST-ZIP:  Change  Addition

TITLE: **VPTD**  Delete  
 NAME: **MANDOHFO, TERRY**  
 STREET ADDRESS: **944 ORTEGA ROAD**  
 CITY-ST-ZIP: **WEST PALM BEACH FL 33405**

TITLE: **VPTD**  Change  Addition  
 NAME: **LANTIGUA, ELIZABETH**  
 STREET ADDRESS: **2795 CIRCLE DRIVE**  
 CITY-ST-ZIP: **WEST PALM BEACH FL 33406**

TITLE:  Delete  
 NAME:  Delete  
 STREET ADDRESS:  Delete  
 CITY-ST-ZIP:  Delete

TITLE:  Change  Addition  
 NAME:  Change  Addition  
 STREET ADDRESS:  Change  Addition  
 CITY-ST-ZIP:  Change  Addition

TITLE:  Delete  
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 CITY-ST-ZIP:  Delete

TITLE:  Change  Addition  
 NAME:  Change  Addition  
 STREET ADDRESS:  Change  Addition  
 CITY-ST-ZIP:  Change  Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *SIGNATURE REQUIRED* **John Bryan, President Feb 13 2002**

CR2E037 (9/01)