

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jan 28, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # N14767**  
 1. Entity Name  
**GUILD FOR INTERNATIONAL PIANO COMPETITIONS, INCORPORATED**



Principal Place of Business      Mailing Address  
**3639 PASEO NAVARRA**      **3639 PASEO NAVARRA**  
**WEST PALM BEACH FL 33405**      **WEST PALM BEACH FL 33405**



2. Principal Place of Business - No P.O. Box #      3. Mailing Address  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

Zip      Country      Zip      Country

1st MOORE      CR2E037 (10/07)  
 4. FEI Number      Applied For  
**59-2670372**      Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**  
**KUHARCIK, JOSEPH**  
**1211 THE PLAZA**  
**SINGER ISLAND FL 33404**

**7. Name and Address of New Registered Agent**  
 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. I am familiar with, and accept the obligations of registered agent.  
 SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature typed or printed name of registered agent in title of principal. (NOTE: If a stock Agent signature, insert which company)

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

**Make Check Payable to Florida Department of State**

**10. OFFICERS AND DIRECTORS**

TITLE	PD	<input type="checkbox"/> Delete
NAME	BRYAN, JOHN	
STREET ADDRESS	3639 PASSEO NAVARRA	
CITY- ST- ZIP	W PALM BCH FL	
TITLE	VS	<input type="checkbox"/> Delete
NAME	WILLIAMS, RHONDA	
STREET ADDRESS	221 BLACKBIRD LN	
CITY- ST- ZIP	JUPITER FL 33458	
TITLE	VT	<input type="checkbox"/> Delete
NAME	OWEN, IMOGENE	
STREET ADDRESS	2628 DUDLEY DR E	
CITY- ST- ZIP	WEST PALM BEACH FL 33415	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	U00000802704	
CITY- ST- ZIP	02/04/08-80010-012 70.00	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: *John Bryan*      **John BRYAN**      1-28-2007      561-833-