

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 16, 2004 8:00 am**  
**Secretary of State**

02-16-2004 90069 001 \*\*\*245.00

**DOCUMENT # N17336**

1. Entity Name  
**SARASOTA MUSIC FESTIVAL, INC.**



Principal Place of Business  
**709 N TAMiami TRAIL  
SARASOTA, FL 34236**

Mailing Address  
**709 N TAMiami TRAIL  
SARASOTA, FL 34236**

**66401955**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01292004 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number  
**59-2603081**

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

**MCKENNA, JOSEPH  
709 NORTH TAMiami TRAIL  
SARASOTA, FL 34236**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2004**

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 **VD** ☐ Delete  
NAME **BEATRICE FRIEDMAN**  
STREET ADDRESS **435 L'AMBIANCE DR PHG**  
CITY-ST-ZIP **LONGBOAT KEY, FL**

TITLE **S** ☐ Delete  
NAME **FREEMAN, RICHARD**  
STREET ADDRESS **715 LONGBOAT CLUB ROAD #303**  
CITY-ST-ZIP **LONGBOAT KEY, FL 34228**

TITLE **CFO** ☐ Delete  
NAME **DOUGLAS, SHANELY M**  
STREET ADDRESS **527-1 ASHLEY PARKWAY**  
CITY-ST-ZIP **SARASOTA, FL 34241**

TITLE **P** ☐ Delete  
NAME **LEUCHTER, HOPE**  
STREET ADDRESS **36 TIDY ISLAND BLVD**  
CITY-ST-ZIP **BRADENTON, FL 34210**

TITLE **VD** ☐ Delete  
NAME **LANGTON, BRYAN**  
STREET ADDRESS **3632 FAIR OAKS PL**  
CITY-ST-ZIP **LONGBOAT KEY, FL 34228**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **TREASURER** ☐ Change ☒ Addition  
NAME **HONEY, MARTHA**  
STREET ADDRESS **3428 HIGHLANDS BRIDGE RD**  
CITY-ST-ZIP **SARASOTA, FL 34235**

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

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

TITLE ☐ Change ☐ Addition  
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STREET ADDRESS  
CITY-ST-ZIP

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

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

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**DOUGLAS M SHANLEY** 1-29-04 941-953-4252

Date

Daytime Phone #