2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 30, 2005 8:00 am
Secretary of State
07-27-2005 90048 020 ***158.75

DOCUMENT # P02000091090

1. Entity Name

TEMPO! MUSIC THERAPY SERVICES OF FLORIDA, INC.

Principal Place of Business	Mailing Address
811 VIRGINIA AVE. TARPON SPRINGS FL 34689	811 VIRGINIA AVE. TARPON SPRINGS FL 34689

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E034 (10/04)

4. FEI Number 54-2068084 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

HAHN WEAVER, ANNA
811 VIRGINIA AVE.
TARPON SPRINGS FL 34689

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

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee Will Be $550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HAHN WEAVER, ANNA 811 VIRGINIA AVE. TARPON SPRINGS FL 34689	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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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 607, 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] ANNA HAHN WEAVER 7/22/05 727 943-2711
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ATTACHMENT

L66024668
#P02000091090

Tempo! Music Therapy Services of Florida, Inc.

EMAIL: tempomusictherapy@yahoo.com WEB: www.tempotherapy.com
811 Virginia Ave Tarpon Springs, FL 34689
*PHONE: 727.543.4303, FAX: 727.934.3423

August 22, 2005

To whom it may concern:

We have received a notice that we have an outstanding balance of $391.25 owed to the Division of Corporations. After calling the Division of Corporations number, we were told that we needed to send a letter stating our concerns.

We had never received the original letter to file our annual report. The first time that we received any notification was a couple of weeks ago when we received a post card notifying us of dissolving our corporation. We even received the postcard with the payment date already past (May 2005). That same day of receiving the postcard, we sent a check for $158.75 to cover yearly expenses along with the business report.

Since we acted immediately to rectify this misunderstanding, and we also never received the initial filing letter, we would ask that you accept our $158.75 and waive the late fee. We apologize for any inconvenience and appreciate your understanding in this matter.

Sincerely,

Anna Hahn Weaver

ATTACHMENT

W60246468

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

July 29, 2005

TEMPO! MUSIC THERAPY SERVICES OF FLORIDA, INC.
811 VIRGINIA AVE.
TARPON SPRINGS, FL 34689

Subject: **TEMPO! MUSIC THERAPY SERVICES OF FLORIDA, INC.**

Reference Number: **P02000091090**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling $158.75; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The fee to file the profit annual report/uniform business report is $150.00 plus $400.00 late fee for a total of $550.00. If a certificate of status is desired, please add an additional $8.75.

There is a balance due of $391.25.

The only provision the Division of Corporations has for waiver of the $400.00 late fee is if the annual report notice was not received. A letter stating this fact must accompany the completed annual report.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/LS
ANNUAL REPORTS SECTION