

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 710550

FILED
Apr 30, 2003
Secretary of State

Entity Name: KEY BISCAYNE MUSIC AND DRAMA CLUB, INC.

Current Principal Place of Business:

% P.O. BOX 178
KEY BISCAYNE, FL 33149

New Principal Place of Business:

Current Mailing Address:

% P.O. BOX 178
KEY BISCAYNE, FL 33149

New Mailing Address:

FEI Number: 65-0317575

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KERR, BEVERLY
1705 NE 157 TERR
MIAMI, FL 33162 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: WILLIAMS, RICHARD
Address: 575 CRANDON BLVD
City-St-Zip: KEY BISCAYNE, FL 33149

Title: PD () Delete
Name: BLASI, ELLEN
Address: 240 CRANDON BLVD #212
City-St-Zip: KEY BISCAYNE, FL 33149

Title: CSD () Delete
Name: PADOVAN, FEDERICO
Address: 425 GRAPETREE DR #204
City-St-Zip: KEY BISCAYNE, FL 33149

Title: D () Delete
Name: THEODORA, ILENE
Address: 151 CRANDON BLVD #1002
City-St-Zip: KEY BISCAYNE, FL 33149

Title: TD () Delete
Name: KERR, BEVERLY
Address: 1705 NE 157 TERR
City-St-Zip: MIAMI, FL 33162

Title: RSD () Delete
Name: EVANS, PILAR
Address: 104 CRANDON BLVD SUITE 301
City-St-Zip: KEY BISCAYNE, FL 33149

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:

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City-St-Zip:

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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: ELLEN BLASI

PD

04/30/2003

Electronic Signature of Signing Officer or Director

Date