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**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 732610

1. Corporation Name

FLORIDA'S SINGING SONS, INC.

Principal Place of Business

1229 N.E. 37TH ST.
FT. LAUDERDALE FL 33334

Mailing Address

1229 N.E. 37TH ST.
FT. LAUDERDALE FL 33334



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip 30 Country

3. Date Incorporated or Qualified

04/29/1975

4. FEI Number

59-1613719

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BANTZ, JEFFREY
3465 NW 17TH TERR
OAKLAND PARK FL 33309

PATRICK S. SCOTT
1 E. Broward Blvd,
#1501
Ft. Lauderdale, FL 33301

81 Name **PATRICK S SCOTT**

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

1 E BROWARD BLVD.

83 #1501

84 City **FT LAUDERDALE**

85 Zip Code **FL 33301**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: *Patrick S. Scott*
Signature, typed or printed name of registered agent and title if applicable.

Patrick S. Scott, Reg'd Agent 4/23/99
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS ☐ DELETE

TITLE **VD**
NAME **WELKER, MARY**
STREET ADDRESS **707 INTERCOSTAL DRIVE**
CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE **SD**
NAME **O'BRIEN, DEBBIE**
STREET ADDRESS **12881 ELMFORD LANE**
CITY-ST-ZIP **BOCA RATON FL**

TITLE **TD**
NAME **SCOTT, PATRICK**
STREET ADDRESS **2070 NE 54 CT**
CITY-ST-ZIP **FT. LAUDERDALE FL 33308**

TITLE **D**
NAME **DOBBINS, ALAN.**
STREET ADDRESS **4317 NE 22ND AVENUE.**
CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE **D**
NAME **SCHNELL, KATHRINE**
STREET ADDRESS **2850 N E 29TH ST**
CITY-ST-ZIP **FT LAUDERDALE FL 00000**

TITLE **PD**
NAME **JANARO, JERRY**
STREET ADDRESS **3221 NE 58TH STREET**
CITY-ST-ZIP **FT LAUDERDALE FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ Change ☐ Addition

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(1)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Patrick S. Scott*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)