

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 18, 2001 8:00 am
Secretary of State

05-18-2001 90008 009 ****61.25

0085749

DOCUMENT # 735129

1. Entity Name

KING HIGH SCHOOL MUSIC CLUB, INC.

Principal Place of Business

Mailing Address

% KING HIGH SCHOOL
 6815 NORTH 56TH STREET
 TEMPLE TERRACE FL 33617

PO BOX 290012
 TEMPLE TERRACE FL 33687
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SLEPER, BRENT
1915 4TH STREET SOUTH
TAMPA FL 33619

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.

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 \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☒ Delete
 NAME ~~KING, JOHN M.~~
 STREET ADDRESS ~~3200 KING CHARLES CIRCLE~~
 CITY-ST-ZIP ~~SEFFNER FL 33584~~

TITLE **PD** ☒ Change ☒ Addition
 NAME **DAVID CURRY**
 STREET ADDRESS **209 WILLOWICK AVE**
 CITY-ST-ZIP **Temple Terrace FL 33617**

TITLE **VPD** ☒ Delete
 NAME ~~HAMILTON, LINDA~~
 STREET ADDRESS ~~9309 ALANBROOKE DR.~~
 CITY-ST-ZIP ~~TEMPLE TERRACE FL 33617~~

TITLE **VPD** ☐ Change ☒ Addition
 NAME **JEFF GREEN**
 STREET ADDRESS **7109 WHITTIER**
 CITY-ST-ZIP **TAMPA, FLA. 33617**

TITLE **S** ☒ Delete
 NAME ~~TERRY ANN ZIELINSKI~~
 STREET ADDRESS ~~4703 DUNQUIN PL~~
 CITY-ST-ZIP ~~TAMPA FL 33610~~

TITLE **VPD** ☐ Change ☒ Addition
 NAME **John Ruckerson**
 STREET ADDRESS **6302 113th AVE E**
 CITY-ST-ZIP **Temple Terrace FL 33617**

TITLE **TD** ☒ Delete
 NAME **CURRY, JILL**
 STREET ADDRESS **209 WILLOWICK AVE**
 CITY-ST-ZIP **TEMPLE TERRACE FL**

TITLE **TD** ☐ Change ☒ Addition
 NAME **BRENT SLEPER**
 STREET ADDRESS **1915 4TH ST. South**
 CITY-ST-ZIP **TPA FLA. 33619**

TITLE **D** ☒ Delete
 NAME **JOHNSTON, MICHAEL**
 STREET ADDRESS **6304 113TH AVE**
 CITY-ST-ZIP **TEMPLE TERRACE FL**

TITLE **S** ☐ Change ☒ Addition
 NAME **JANET O'SHEA**
 STREET ADDRESS **822 ROYAL GREENS DR.**
 CITY-ST-ZIP **TAMPA, TEMPLE FLA. 33617**

TITLE **D** ☒ Delete
 NAME **GRIFFIN, MARY**
 STREET ADDRESS **3209 KING CHARLES COURT**
 CITY-ST-ZIP **SEFFNER FL**

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, without other like empowered.

SIGNATURE: SIGNATURE REQUIRED

CR2E037 (10/00)