## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED DOCUMENT # **743437** Jan 25, 2000 8:00 am Secretary of State 1. Entity Name S.M.H.P. CONCERT BAND, INC. 01-25-2000 90032 034 \*\*\*\*61.25 Principal Place of Business Mailing Address 3405 OAKWOOD BLVD. S. 3405 OAKWOOD BLVD. S. SARASOTA FL 34237 i SARASOTA FL 34237-7415 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-1882881 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) LAIER, LEO 3405 OAKWOOD BLVD. S. SARASOTA FL 34237 Zip Code City FL 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 DATE (NOTE: Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11, P/D 5 ☐ Change Addition ☐ Delete TITLE TITLE CARTER, LOIS NAME NAME STREET ADDRESS STREET ADDRESS 417 OAKWOOD BLVD. E. CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34237 ☐ Change ☐ Addition TITLE T/D ☐ Delete NAME CARTER, WILLIAM NAME 417 OAKWOOD BLVD. E. -STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF SARASOTA FL 34237 ☐ Change ☐ Addition TITLE ☐ Delete NAME **CUMMING, ROGERS** STREET ADDRESS STREET ADDRESS 617 N. TAMIAMI TRL #4 CITY-ST-ZIP CITY-ST-ZIE VENICE FL 34292 ☐ Change Addition TITLE ☐ Delete NAME LAIER, LEO STREET ADDRESS STREET ADDRESS 3405 OAKWOOD BLVD. S. CITY-ST-ZIP CITY-ST-ZIE SARASOTA FL 34237 ☐ Change Addition ☐ Delete TITLE TITLE NAME GERLETTI, MERRILYN STREET ADDRESS STREET ADDRESS 2155 WOOD ST. #A-1 CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34237 ☐ Change Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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

1-16-200

941-9520694