

2000 UNIFORM BUSINESS REPORT (UBR)

4/5

FILED
May 15, 2000 8:00 am
Secretary of State

04-05-2000 90111 031 ****61.25

DOCUMENT # 746020

1. Entity Name

CVE/DEERFIELD BEACH SYMPHONY ORCHESTRA, INC.

Principal Place of Business

AUGUST. BERNARD
 BERKSHIRE. E. 1074
 DEERFIELD BEACH FL 33442
 US

Mailing Address

AUGUST. BERNARD
 BERKSHIRE E. 1074
 DEERFIELD BEACH FL 33442-3358
 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

59-1914920

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

AUGUST. BERNARD
 BERKSHIRE, E. 1074
 DEERFIELD BEACH FL 33442

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 VP D ☐ Delete
 NAME POSTMAN, JACK
 STREET ADDRESS 6339 STANLEY LANE
 CITY-ST-ZIP DELRAY BCH FL

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE MD ☐ Delete
 NAME COUSIN, RUTH
 STREET ADDRESS VENTNOR O 4047
 CITY-ST-ZIP DEERFIELD BEACH FL

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE TD ☐ Delete
 NAME AUGUST, BERNARD
 STREET ADDRESS BERSHIRE E 1074
 CITY-ST-ZIP DEERFIELD BEACH FL

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE SD ☒ Delete
 NAME LAMPERT, ADELE
 STREET ADDRESS 2074 SW 17 DR.
 CITY-ST-ZIP DEERFIELD BEACH FL

TITLE SECRETARY D ☒ Change ☐ Addition
 NAME KESSELMAN, ELAINE
 STREET ADDRESS CAMBRIDGE V 2106
 CITY-ST-ZIP DEERFIELD BEACH FL

TITLE PD ☐ Delete
 NAME ROSENSTROCK, PHILIP
 STREET ADDRESS 780 N.E., 199TH
 CITY-ST-ZIP N. MIAMI BEACH FL

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Apr. 1, 2000

Date

954-427-1372

Daytime Phone #

CR2E037 19/99