

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2002 8:00 am
Secretary of State

05-01-2002 91623 012 ****61.25

DOCUMENT # 746020

1. Entity Name

CVE/DEERFIELD BEACH SYMPHONY ORCHESTRA, INC.

Principal Place of Business

Mailing Address

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

AUGUST, BERNARD
BERKSHIRE E. 1074
DEERFIELD BEACH FL 33442
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 ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
VP
POSTMAN, JACK
6339 STANLEY LANE
DELRAY BCH FL

TITLE ☐ Change ☒ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
V/D

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

TITLE ☐ Change ☒ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
M/D

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

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
AT
KESSELMAN, ELAINE
CAMBRIDGE V2106
DEERFIELD BEACH FL

TITLE ☐ Change ☒ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
AT/D

TITLE ☒ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
PD
ROSENSTOCK, PHILIP
780 N.E., 189TH
N. MIAMI BEACH FL

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
(PRES) PD
IRWIN S. FELDMAN
2697 N. OCEAN BVD
BOCA RATON, FL

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
(SEC) SD
CAROLE LERNER
79 VENTNOR D.
DEERFIELD BEACH FL

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:

Mr. Bernard August
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGN

Mr. Bernard August
1074 Berkshire E

Date

954-426-1372
 Daytime Phone #

CR2E037 (9/01)