

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761500

FILED
Jan 23, 2009
Secretary of State

Entity Name: MANATEE COUNTY, FLORIDA, CHAPTER OF THE SOCIETY FOR THE PRESERVATION AND ENCOURAGEMENT OF BARBERSHOP QUARTET SINGING IN AMERICA, INC.

Current Principal Place of Business:

327 TARYAN ST.
ANNA MARIA, FL 34216 US

New Principal Place of Business:

<UNUSED>
ANNA MARIA, FL 34216 US

Current Mailing Address:

PO BOX 1472
ANNA MARIA, FL 342161472 US

New Mailing Address:

FEI Number: 59-2169764 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CANNIFF, CHARLES
327 TARPON ST.
ANNA MARIA, FL 34216 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: AMMONS, JERRY
Address: 4106 61ST AVE. TERRACE W.
City-St-Zip: BRADENTON, FL 34210

Title: PD () Delete
Name: CANNIFF, CHARLEY
Address: PO BOX 1472 (327 TARPON STREET)
City-St-Zip: ANNA MARIA, FL 34216

Title: SD () Delete
Name: GEISINGER, KENNETH
Address: 5811 GARDEN LAKES FERN
City-St-Zip: BRADENTON, FL 34203

Title: TD () Delete
Name: SISSON, WILLIAM B
Address: 808 53RD AVE E LOT 299
City-St-Zip: BRADENTON, FL 342035825

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM B. SISSON

TD

01/23/2009

Electronic Signature of Signing Officer or Director

Date