2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 761518

1. Entity Name

OCALA CHAPTER OF THE SOCIETY FOR THE PRESERVATIO N AND ENCOURAGEMENT OF BARBERSHOP QUARTET SINGIN



FILED Apr 08, 2003 8:00 am Secretary of State 04-08-2003 90101 029 ****61.25

Principal Plac	ce of Business	Mailing Address		_ 1				
-C/O-JOHN F. P.O. BOX 199 BELLEVIEW FL	7171SWSTRoads	,BE LLEVIEW FL 844 21 ンジ:	40500612	En		· ·		
2 Principal I	Ocala, F134474		alaF13	4474				
2. Principal Place of Business 7/7/ SW State Road 200		3 Mailing Address 450el RSwanson			01101 F1801 D1101 F100F 1814 010			
Suite, Apt		Suite, Apt. #, etc. 53405W61		, ×	CHECK HERE IF MAK	(ING CHANGES	3	
City & State Olala FL		City & State Ola/a F/		4. FEI Number	4. FEI Number 93-0805344		pplied For ot Applicable	
Zip 3 447	Country	Zip	Country USA	5. Certificate of	Status Desired	\$8.75 Ad	ditional	
27//	6. Name and Address of Current	Registered Agent	US/T	7. Name and Ac	Idress of New Register	Fee Require	3G	
			Name	T. 100				
	JA., JOHN F		Street A	dd <u>re</u> sş (P.O. Box Number is	P.O. Box Number is Not Acceptable)			
	E 			540 SW 61	151 Lane	•		
GELLEVIE	ETT 1 E 04420							
			City	cala	ı	FL 3527	1e 474	
	e named entity submits this statement fo	r the purpose of changing its re	egistered office o		n the State of Florida. I	am familiar with,	and accept	
the obliga	tions of registered agent.				- /			
SIGNATURE	Joll Chan	uses	•		4-	-7-03		
6	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered Agent signa	ture required when reinstating)	DA	TE		
1	FILE NOW: FEE IS \$61.25	9. Election Camp	paign Financing	\$5.00 May Be	Make Ch	eck Payable	to	
'		Truct Fund Co	ntribution				a	
		Trust Fund Co	ntribution.	Added to Fees	Florida De	partment of	State	
10.	OFFICERS AND DIF		ntribution.	Added to Fees ADDITIONS/CHANGE	Florida Dep	partment of		
10.	OFFICERS AND DIF			Added to Fees ADDITIONS/CHANG Treasurer	GES TO OFFICERS AND	partment of	V 10	
10. TITLE NAME	OFFICERS AND DIF	RECTORS	11. TITLE NAME	Added to Fees ADDITIONS/CHANGE Treasurer Joel R.S. Way	GES TO OFFICERS AND	DIRECTORS IN	N 10	
10.	OFFICERS AND DIF PD RAYMOND, JOHN 12500 SW 8TH AVENUE	RECTORS	11.	Added to Fees ADDITIONS/CHANGE TWEOSUVEN JOEL R.S.W. 35405W 615	GES TO OFFICERS AND USOn	DIRECTORS IN	N 10	
10. TITLE NAME STREET ADDRESS	OFFICERS AND DIF	RECTORS Delete	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Added to Fees ADDITIONS/CHANG Treasurer Joel R.S. War 35405W 6121 Ocala F13	GES TO OFFICERS AND USOn	DIRECTORS IN Change	J 10 Set Addition	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIF PD RAYMOND, JOHN 12500 SW 8TH AVENUE OCALA FL 34473 PVT SHAERER, JOHN	RECTORS	11. TITLE NAME STREET ADDRESS	Added to Fees ADDITIONS/CHANG The assurer Joel R.S. War 35405 W 6151 Ocala F13 V.P. Music Daya F 115/en	SES TO OFFICERS AND USON Lm 4474	DIRECTORS IN	N 10	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND DIF PD RAYMOND, JOHN 12500 SW 8TH AVENUE OCALA FL 34473 PVT SHAERER, JOHN 8785 SW 91ST STREET	RECTORS Delete	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Added to Fees ADDITIONS/CHANG The assurer Joel R.S. War 35405 W 6151 Ocala F13 V.P. Music Daya F 115/en	SES TO OFFICERS AND USON Lm 4474	DIRECTORS IN Change	J 10 Set Addition	
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10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD RAYMOND, JOHN 12500 SW 8TH AVENUE OCALA FL 34473 PVT SHAERER, JOHN 8785 SW 91ST STREET OCALA*FL-34481 VPD	RECTORS Delete	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS = CITY-ST-ZIP = :== TITLE	Added to Fees ADDITIONS/CHANG TWEOSWEN JOEL R.S.W. D. S.540SW 6181 OCALA F13 V.P. Music Doug Ensley 91953W 9618 OCALAFI3 VPChapter De	GES TO OFFICERS AND ASON LM 4474 COURT Rd 448/2	DIRECTORS IN Change	J 10 Set Addition	
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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:

4-7-03 352-237-8076