2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000002189

Entity Name: BONITA SPRINGS SPEAKERS ASSEMBLY, INC.

FILED Sep 04, 2003 Secretary of State

Current P	rincipal Place of Business:	New Principal Place of Business:
P. O. BOX BONITA S	. 367886 PRINGS, FL 34136 US	
Current M	lailing Address:	New Mailing Address:
P. O. BOX BONITA S	. 367886 PRINGS, FL 34136 US	
FEI Number	: 59-3663126 FEI Number Applied For()	FEI Number Not Applicable () Certificate of Status Desired ()
Name and	Address of Current Registered Agent:	Name and Address of New Registered Agent:
27061 DRI BONITA S The above	S, AUDREY J IFTWOOD DRIVE PRINGS, FL 34135 US named entity submits this statement for the present for the pres	rpose of changing its registered office or registered agent, or both,
SIGNATU		
	Electronic Signature of Registered Age	nt Date
OFFICERS	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR
Title: Name: Address: City-St-Zip:	DP () Delete WYANT, CORBIN A 320 BOWLINE DRIVE NAPLES, FL 34103 US	Title: DVP (X) Change () Addition Name: STEVEN, WHITLEY R Address: P. O. BOX 1020 City-St-Zip: FORT MYERS, FL 33902 US
Title: Name: Address: City-St-Zip:	DVP () Delete BRINGARDNER, THOMAS A JR. 26790 S. TAMIAMI TRAIL BONITA SPRINGS, FL 34134 US	Title: DPE (X) Change () Addition Name: BRINGARDNER, THOMAS A JR. Address: 4300 GULF SHORE BLVD. NORTH City-St-Zip: NAPLES, FL 34103 US
Title: Name: Address: City-St-Zip:	DPE () Delete LUESSENHOP, FRANCES M 27160 OAK KNOLL DRIVE BONITA SPRINGS, FL 34134 US	Title: DP (X) Change () Addition Name: LUESSENHOP, FRANCES M Address: 27160 OAK KNOLL DRIVE City-St-Zip: BONITA SPRINGS, FL 34134 US
Title: Name: Address: City-St-Zip:	DS () Delete HOUCK, EDWARD F DR 25150 GOLDCREST DRIVE BONITA SPRINGS, FL 34134 US	Title: DS (X) Change () Addition Name: ROBERT, HAGY R Address: 24720 LYONIA LANE City-St-Zip: BONITA SPRINGS, FL 34134 US
Title: Name: Address: City-St-Zip:	DT () Delete AKERS, STEVE P O BOX 40 BONITA SPRINGS, FL 34133	Title: () Change () Addition Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: STEVE AKERS DT 09/04/2003