

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000006780

1. Entity Name

OPERA FEST OF FLORIDA, INC.

FILED

Apr 17, 2002 8:00 am
Secretary of State

04-17-2002 90037 049 ****70.00

Principal Place of Business

Mailing Address

10365 ULMERTON RD. #62
LARGO FL 33771

2945C EAST BAY DR. #124
LARGO FL 33771

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

59-3676316

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134

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 PD
NAME PRINGLE, WILLIAM H
STREET ADDRESS 10365 ULMERTON RD
CITY-ST-ZIP LARGO FL 33771 ☐ Delete

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

TITLE VSD
NAME STEVENS, HOLLY
STREET ADDRESS 1405 REGAL RD
CITY-ST-ZIP CLEARWATER FL 33756 ☒ Delete

TITLE VSD
NAME Colleen Westover-Rabe
STREET ADDRESS 120 Woodcreek Dr., South
CITY-ST-ZIP Safety Harbor, FL 34695 ☒ Change ☐ Addition

TITLE VTD
NAME HUTEK, SHEILA M
STREET ADDRESS 2344 SURREY LN
CITY-ST-ZIP CLEARWATER FL 33763 ☒ Delete

TITLE VTD
NAME Dorothy A. Eddy
STREET ADDRESS Lot 51, 10365 Ulmerton Rd
CITY-ST-ZIP LARGO, FL 33771 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME also
STREET ADDRESS 25 Singleton Drive
CITY-ST-ZIP New Hartford, N.Y. 13413 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE VD Publicity
NAME Joanne c. Florin
STREET ADDRESS 3106 Columns Circle, Box 126
CITY-ST-ZIP Seminole, FL 33772 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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.

Ph: (727) 501-0095

SIGNATURE:

William H. Pringle
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

William H. Pringle 8 Apr 2002

Date

Daytime Phone #

CR2E037 (9/01)