


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006 8:00 am
Secretary of State

04-26-2006 90194 019 ****70.00

DOCUMENT # N00950 1. Entity Name NORTH PORT ORCHESTRA ASSOCIATION, INC.					
Principal Place of Business 6400 W. PRICE BLVD NORTH PORT, FL 34286 US			Mailing Address 6400 W. PRICE BLVD NORTH PORT, FL 34286 US		
2. Principal Place of Business 6400 W. PRICE BLVD Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State NORTH PORT, FLORIDA			City & State		
Zip 34286		Country SARASOTA		Zip Country	
4. FEI Number 59-2454986				Applied For Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent JOHNSON, DORIS T 5709 KENWOOD DRIVE NORTH PORT, FL 34287			7. Name and Address of New Registered Agent 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE <u>April 20, 2006</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DORIS T. JOHNSON <input checked="" type="checkbox"/> Delete GLASSER, SANFORD DR. 5709 KENWOOD 5300 WHITE IBIS DR. NORTH PORT, FL 34287 NORTH PORT, FL 34287		TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GERLACH, JUDY <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 3105 SCRANTON ST. PORT CHARLOTTE, FL 33942	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WITHERS, JUNE 1300 N RIVER RD. VENICE, FL 34293		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WILLIAMS, MARY 2184 BRUBECK NORTH PORT, FL 34287		TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HAWKINS, LORRAINE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 3063 ELLERY ST. PORT CHARLOTTE, FL 33952	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RUSSELL, MARGARET 5158 WILTON CT. NORTH PORT, FL 34287		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRUSTEE EMERITUS MCMULLEN, ROBERT 5000 ASHTON GARDEN DR., #111 VENICE, FL 34292		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CAPEK, BRENDA 3328C SUNSET KEY CIR. PUNTA GORDA, FL 33955		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Doris T. Johnson</u> <u>April 20, 2006</u> (941) 426-7467 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

DOCUMENT # N00950

NORTH PORT ORCHESTRA ASSOCIATION, INC.

ATTACHMENT

40063308

pg 2

T.

COSTELLO, VIC

☐ CHANGE ☐ ADDITION

2600 TUSKET AVENUE

NORTH PORT, FL. 34286

T. CARNEY, LEN

☐ CHANGE ☐ ADDITION

14803 TAMIAH TRAIL

TARPON.

NORTH PORT, FL. 34287

Doris D. Johnson April 20, 2006 (941) 426-7467