

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

FILED
Aug 01, 2003 8:00 am
Secretary of State

08-01-2003 90063 014 ****70.00

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1. Entity Name

COUNTRYSIDE HIGH SCHOOL DRAMA BOOSTER CLUB, INC.



Principal Place of Business

**2908 SABER DRIVE
CLEARWATER FL 33759**

Mailing Address

**2908 SABER DRIVE
CLEARWATER FL 33759**

2. Principal Place of Business

212 WATER VIEW CT.

3. Mailing Address

212 WATER VIEW CT.

Suite, Apt. #, etc.

SAFETY HARBOR

Suite, Apt. #, etc.

City & State

FLORIDA

City & State

SAFETY HARBOR, FL.

Zip

34695

Country

USA

Zip

34695

Country

USA

4. FEI Number **59-3733218**

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**MANRY, JOHN
2908 SABER DRIVE
CLEARWATER FL 33759**

7. Name and Address of New Registered Agent

Name

ALTNER, JANIS

Street Address (P.O. Box Number is Not Acceptable)

212 WATER VIEW CT.

City

SAFETY HARBOR

FL

Zip Code

34695

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

JANIS ALTNER **JANIS ALTNER** **PRES.**

7-26-03

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

After September 10, 2003, min will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$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	DP	☒ Delete
NAME	MANRY, JOHN	
STREET ADDRESS	2908 SABER DRIVE	
CITY-ST-ZIP	CLEARWATER FL 33759	
TITLE	DV	☐ Delete
NAME	BROWN, WILLIAM	
STREET ADDRESS	2941 ATWOOD DR	
CITY-ST-ZIP	CLEARWATER FL 33761	
TITLE	DT	☒ Delete
NAME	BROWN, WILLIAM	
STREET ADDRESS	2941 ATWOOD DR.	
CITY-ST-ZIP	CLEARWATER FL 33761	
TITLE	DS	☒ Delete
NAME	BRUDNY, ROCHELLE	
STREET ADDRESS	105 TURTLE CREEK DR	
CITY-ST-ZIP	OLDSMAR FL 34677	
TITLE	D	☒ Delete
NAME	BROWN, PEGGY	
STREET ADDRESS	202 HILLCREST DR	
CITY-ST-ZIP	SAFETY HARBOR FL 34695	
TITLE	D	☒ Delete
NAME	ROMANO, RUSS	
STREET ADDRESS	2908 SABER DRIVE	
CITY-ST-ZIP	CLEARWATER FL 33759	

TITLE	DP	☐ Change ☐ Addition
NAME	ALTNER, JANIS	
STREET ADDRESS	212 WATER VIEW CT.	
CITY-ST-ZIP	SAFETY HARBOR, FL. 34695	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	DT	☒ Change ☐ Addition
NAME	ROSEN, Deborah	
STREET ADDRESS	5922 Elysium Way	
CITY-ST-ZIP	Clearwater FL 33759	
TITLE	DS	☒ Change ☐ Addition
NAME	Kimberly LaMaster	
STREET ADDRESS	2512 Cypress Bend Dr. W.	
CITY-ST-ZIP	Clearwater 33761	
TITLE	D	☒ Change ☐ Addition
NAME	Brenda Taylor	
STREET ADDRESS	2325 Barton Lane	
CITY-ST-ZIP	Clearwater, FL 33759	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: **JANIS ALTNER**

7-26-03

727-796-9573

CR2E037 (4/03)