

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000008467

FILED
May 01, 2003
Secretary of State

Entity Name: BIG BEND CHAPTER, FLORIDA MOTION PICTURE AND TELEVISION ASSOCIATION, INC.

Current Principal Place of Business:

3940 LEANE DRIVE
TALLAHASSEE, FL 32309

New Principal Place of Business:

Current Mailing Address:

3940 LEANE DRIVE
TALLAHASSEE, FL 32309

New Mailing Address:

FEI Number: 42-1557149

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOLEY, STEPHEN H
3940 LEANE DRIVE
TALLAHASSEE, FL 32309

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FOLEY, STEPHEN H
Address: 3940 LEANE DRIVE
City-St-Zip: TALLAHASSEE, FL 32309

Title: VD () Delete
Name: GRIFFITH, TOM EXEC.
Address: 2504 FRITZLANE
City-St-Zip: TALLAHASSEE, FL 32304

Title: VD () Delete
Name: DASPIT, GILBERT
Address: 305 BROWARD ST.
City-St-Zip: TALLAHASSEE, FL 32301

Title: TD () Delete
Name: MCGURIK, JOHN
Address: 2210 ALTOONA DR.
City-St-Zip: TALLAHASSEE, FL 32309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: STEPHEN H. FOLEY

PD

05/01/2003

Electronic Signature of Signing Officer or Director

Date