

NO2932

Requester's Name
Alumni Singers, Inc.
P. O. Box 10238
St. Petersburg, FL 33731
City/State/Zip Phone #

100003030721--8
-11/01/99--01092--003
*****35.00 *****35.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

V. SHEPARD NOV 12 1999

Examiner's Initials

ARTICLES OF DISSOLUTION

Pursuant to section 617.1403, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution:

FIRST: The name of the corporation is:

THE ALUMNI SINGERS ASSOCIATION OF ST. PETERSBURG, FLORIDA, INC.

SECOND: Adoption of dissolution
(Complete Section I or II)

SECTION I

If the corporation has members entitled to vote:

The date of the meeting of members at which the resolution to dissolve was adopted was
October 14, 1999.

(CHECK ONE)

- ☒ The number of votes cast for dissolution was sufficient for approval
- ☐ The resolution was adopted by written consent and executed in accordance with 617.0701, Florida Statutes

SECTION II

If the corporation has no members or members with voting rights:

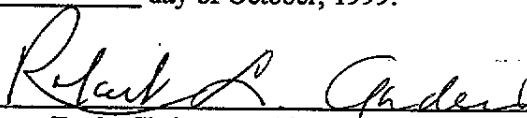
The corporation has no members or members with voting rights

The date of adoption of the resolution by the board of directors was _____.

The number of directors in office was _____ and the vote for the resolution was _____ for and _____ against.

Signed this _____ day of October, 1999.

Signature



(By the Chairman or Vice Chairman of the Board, President or other officer)

Robert L. Anders

Typed or printed name

President

Title

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