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

9/18/2003-90031-042-$61.25-$61.25

FILED
03 OCT 14 PM 2:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N07799

1. Entity Name
SOCIETY FOR ENTERTAINMENT AND ARTS DEVELOPMENT, INC.

Principal Place of Business	Mailing Address
18200 PAULSON DR UNIT 4-A PORT CHARLOTTE, FL 33954	P O BOX 495967 PORT CHARLOTTE, FL 33949-5967

[redacted]

☒ CHECK HERE IF MAKING CHANGES

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 65-2530729 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SHADLE, KRISTY F 18200 PAULSON DRIVE UNIT 4A PORT CHARLOTTE, FL 33954	Name: Paula E. Welter Street Address (P.O. Box Number is Not Acceptable): 2424 Placida Rd. Apt D304 City: Englewood FL Zip Code: 34224

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: Paula E. Welter 10/7/03
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

TOTAL FEE NOW / FEE IS $61.25 / Make Check Payable to: Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD SHADLE, KRISTY F 715 BAL HARBOR BLVD PUNTA GORDA, FL 33950	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Paula E. Welter 2424 Placida Rd. Apt D304 Englewood, FL 34224	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV ADAMS, BART 168 DARTMOUTH DR PORT CHARLOTTE, FL 33952	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV Molly Parkes PO Box 496186 Port Charlotte, FL 33949-6186	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD POORE, SHARON 3079 ST JAMES STREET PORT CHARLOTTE, FL 33952	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/02)

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: PAULA E. WELTER Paula E. Welter 9/14/03 941-474-5492
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL Date Daytime Phone #