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

## **DOCUMENT # N12673**

1. Entity Name

## LOCAL 412, MANATEE AND SARASOTA COUNTY, INTERNAT



## FILED Mar 13, 2003 8:00 am Secretary of State

03-13-2003 90063 006 \*\*\*\*61.25

IONAL A	LLIANCE OF THEATRICAL S	TAGE EMPLOYEES	AND						
Principal Place of Business P.O. BOX 1307 TALLEVAST FL 34270-1307		Mailing Address P.O. BOX 1307 TALLEVAST FL 3427(	-						
2 Dringing	Plane of Durings	0.14-10-1-11	<u></u>						
2. Principal Place of Business		3. Mailing Address	3. Mailing Address			### ##### ##### ######################			
Suite, Apt. #, etc.		Suite, Apt. #, etc	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
City & State		City & State	City & State			9-2710633	———	applied For lot Applicable	
Zip Country		Zip	Zip Cou		5. Certificate of Status Desired S8.75 Additional Fee Required		Iditional		
	6. Name and Address of Curre	nt Registered Agent			- 7.≃Name and Add	ress of New Registered /			
55445				Name					
Drake, J. Kevin ESQ 1432 1ST Street Sarasota Fl 34236				Street Add	ress (P.O. Box Number is N	ss (P.O. Box Number is Not Acceptable)			
SAHASU	71A FL 34236			<u></u>					
				City			Zip Coo	de	
8. The above	e named entity submits this statement	for the purpose of changi	ng its register	red office or re	gistered agent, or both, in	the State of Florida. I am f	amiliar with.	and accept	
the obliga	ations of registered agent.								
SIGNATURE									
	Signature, typed or printed name of registered agr	ent and title if applicable.	(NOTE: Registere	ed Agent signature r	equired when reinstating)	DATE			
· ·									
FILE NOW: FEE IS \$61.25  9. Election Ca Trust Fund (			n Campaign F und Contribut		<b>\$5.00</b> May Be Added to Fees	Make Check Florida Depart			
10.	OFFICERS AND I	DIRECTORS	11.		ADDITIONS/CHANGE	ES TO OFFICERS AND DIF	RECTORS IN	V 10	
TITLE	D	☐ Delete	TITL	E			Change	☐ Addition	
NAME	SORENSEN, ROY		NAM	i			_	ĺ	
STREET ADDRESS CITY-ST-ZIP	3729 GOCIO RD SARASOTA FL 34232			EET ADDRESS (- ST-ZIP					
TITLE	PD		TITLI	_ +-					
NAME	TERRY, TROFFER	r <b>Ž</b> v ⊓eiére	NAM	l	PD		Change Change	☐ Addition	
STREET ADDRESS	3082 MYRTLE ST			EET ADDRESS	TINO WALLENI		•		
CITY-ST-ZIP	SARASOTA FL 34234	<u> </u>	CITY	-ST-ZIP	3650 Henriet	cta Place			
TITLE	S DATE OF TOTAL A	<b>▼</b> Delete	TITLE	<b>⊦</b> I	S	34234	K Change	☐ Addition	
name Street address	BARHAM, PATRICIA A 6513 TEXAS ST		NAM	IE	T. Scott Lor	na na			
CITY-ST-ZIP	BRADENTON FL 34281				1231 13th St				
TITLE	V		TITLE		Sarasota, F	1 3 4 3 3 E			
NAME	ROCHE, ANN M	X Delete	NAM		V		<b>☆</b> Change	☐ Addition	
STREET ADDRESS	2739 ASPINWALL ST		STRE	ET ADDRESS	MICHAEL VERE	BIL			
CITY-ST-ZIP	SARASOTA FL 34237		CITY	Į.	4912 SEVILLE	*			
TITLE	0	☐ Delete	TITLE	E	SARASOTA, FI	34235	☐ Change	Addition	
NAME	CLARK, FRANK		: NAMI					}	
STREET ADDRESS CITY-ST-ZIP	1674 UNIVERSITY PKWY   SARASOTA FL 34243			ET ADDRESS -ST-ZIP				}	
IITLE	T			. "-	<del></del>				
NAME	WERLING, FREDRICK J	X Delete	TITLE	. 1:	T		Change X X	☐ Addition	
STREET ADDRESS	324 MAGELLAN DR			ET ADDRESS   I	MATTHEW PARK				
CITY-ST-ZIP	SARASOTA FL 34234		CITY-	-01-211	240 AMHERST				
2. Thereby o	certify that the information supplied wi	th this filing does not quali	fu for the over	motion state d	SARASOTA FL	34232			

indicated on this report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes 1 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 effect like empowered.

**SIGNATURE:** 

SCOTT LONG

March 5,2003 041265