

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2008 8:00 am
Secretary of State

03-31-2008 90008 040 ****61.25

DOCUMENT # N15453



1. Entity Name
**SOCIETY FOR THE PRESERVATION OF EARLY
COUNTRY AND WESTERN MUSIC, INC.**

Principal Place of Business
**2616 S PARSONS AVE
SEFFNER, FL 33584 US**

Mailing Address
**2616 S PARSONS AVE
SEFFNER, FL 33584 US**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03132008

Chg-NP

CR2E037 (12/06)

City & State

City & State

4. FEI Number
59-2771657

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

**CONKLIN, KEN
2616 S PARSONS AVE
SEFFNER, FL 33584**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

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

TITLE **D** ☐ Delete
NAME **BAKER, BETTY**
STREET ADDRESS **605 CHAIR VAUX-RUE**
CITY-ST-ZIP **SEFFNER, FL 33584**

TITLE **D** ☐ Delete
NAME **WORDEN, LARRY**
STREET ADDRESS **17804 SIMMS RD**
CITY-ST-ZIP **ODESSA, FL 335564727**

TITLE **D** ☒ Delete
NAME **POOLE, DAN**
STREET ADDRESS **2702 CEDAR CREST PL**
CITY-ST-ZIP **ZEPHYRHILLS, FL 335445733**

TITLE **D** ☐ Delete
NAME **HUTCHINS, SHARA**
STREET ADDRESS **1901 N. LIME ST.**
CITY-ST-ZIP **PLANT CITY, FL 33563**

TITLE **D** ☒ Delete
NAME **BYRON, LAWRENCE**
STREET ADDRESS **2023 DARLINGTON OAK DR.**
CITY-ST-ZIP **SEFFNER, FL 33584**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☒ Change ☐ Addition
NAME **ROBERT DAVIS**
STREET ADDRESS **316 CHADWELL DR.**
CITY-ST-ZIP **SEFFNER, FL 33584**

TITLE **D** ☒ Change ☐ Addition
NAME **SHIRLEY WETHERINGTON**
STREET ADDRESS **119 W. WILDER RD**
CITY-ST-ZIP **PLANT CITY, FL 33566**

TITLE **D** ☐ Change ☒ Addition
NAME **JOHN SEMINOFF**
STREET ADDRESS **103 MAHONEY ST. APT. 606**
CITY-ST-ZIP **PLANT CITY, FL 33563**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 exemptions contained in Chapter 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-18-08 813-689-9266

Date

Daytime Phone #

ATTACHMENT 40054368

#N15453

SOCIETY FOR THE PRESERVATION OF
EARLY COUNTRY AND WESTERN MUSIC

VP

A.L. LOWDEN

8908 N. Willow Ave.

TAMPA, FL 33604-1160

S/T

HELEN HALBERT

308 E. NORTH ST.

TAMPA, FL 33604-6161