2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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Feb 16, 2004 8:00 am
Secretary of State
02-16-2004 90069 001 ***245.00

DOCUMENT # N17338

1. Entity Name
FLORIDA BRASS QUINTET, INC.

66401954

Principal Place of Business	Mailing Address
709 N TAMIAMI TRAIL SARASOTA, FL 34236	709 N TAMIAMI TRAIL SARASOTA, FL 34236

01292004 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2603081

☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MCKENNA, JOSEPH
709 N. TAMIAMI TRAIL
SARASOTA, FL 34236

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2004

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

10. OFFICERS AND DIRECTORS

TITLE	VD
NAME	BEATRICE FRIEDMAN
STREET ADDRESS	435 L'AMBIANCE DR PHG
CITY-ST-ZIP	LONGBOAT KEY, FL 34228
TITLE	P
NAME	LEUCHTER, HOPE
STREET ADDRESS	36 TIDY ISLAND BLVD
CITY-ST-ZIP	BRADENTON, FL 34210
TITLE	T
NAME	HONEY, MARTHA
STREET ADDRESS	3428 HIGHLANDS BRIDGE RD
CITY-ST-ZIP	SARASOTA, FL 34235
TITLE	S
NAME	FREEMAN, RICHARD
STREET ADDRESS	775 LONGBOAT CLUB RD., #303
CITY-ST-ZIP	LONGBOAT KEY, FL 34228
TITLE	CFO
NAME	SHANLEY, DOUGLAS M
STREET ADDRESS	5271 ASHLEY PKWY
CITY-ST-ZIP	SARASOTA, FL 34241
TITLE	VD
NAME	LANGTON, BRYAN D
STREET ADDRESS	3632 FAIR OAKS PLACE
CITY-ST-ZIP	LONGBOAT KEY, FL 34228

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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: Douglas M Shanley DOUGLAS M SHANLEY 1-29-04 941-953-4252
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #