2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2007 08:00 AM
Secretary of State

DOCUMENT # N17338

1. Entity Name
FLORIDA BRASS QUINTET, INC.

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

03072007 No Chg-NP CR2E037 (4/06)

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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, 2007

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

U00000664136
03/22/07-80032-010 61.25

10. OFFICERS AND DIRECTORS

TITLE	VD
NAME	BEATRICE FRIEDMAN
STREET ADDRESS	435 L'AMBIANCE DR PHG
CITY-ST-ZIP	LONGBOAT KEY, FL 34228
TITLE	VD
NAME	TOULMIN, VIRGINIA
STREET ADDRESS	340 S. PALM AVENUE APT 143
CITY-ST-ZIP	SARASOTA, FL 34236
TITLE	T
NAME	HONEY, MARTHA
STREET ADDRESS	3428 HIGHLANDS BRIDGE RD
CITY-ST-ZIP	SARASOTA, FL 34235
TITLE	S
NAME	MONSKY, MARIE
STREET ADDRESS	8283 SHADOW PINE WAY
CITY-ST-ZIP	SARASOTA, FL 34238
TITLE	CFO
NAME	SHANLEY, DOUGLAS M
STREET ADDRESS	5271 ASHLEY PKWY
CITY-ST-ZIP	SARASOTA, FL 34241
TITLE	PD
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 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: Douglas M Shanley 3/8/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #