

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N25640

1. Entity Name

SECOND GENERATION SINGERS, INC.

FILED  
Apr 02, 2001 8:00 am  
Secretary of State

04-02-2001 90069 048 \*\*\*\*61.25

735503



DO NOT WRITE IN THIS SPACE

Principal Place of Business C/O KATHERINE T. SCHNELL 2850 NE 29TH STREET FT. LAUDERDALE FL 33306	Mailing Address C/O KATHERINE T. SCHNELL 2850 NE 29TH STREET FT. LAUDERDALE FL 33306
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2. Principal Place of Business 1229 NE 37 Street	3. Mailing Address 1229 NE 37 Street
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Ft. Lauderdale, FL	City & State Ft. Lauderdale, FL
Zip 33334	Country Broward

4. FEI Number 65-0109813	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  SCHNELL, KATHERINE T. 2850 NE 29TH STREET FT. LAUDERDALE FL 33306
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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.

SIGNATURE Katherine Schnell DATE 3/31/01  
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SCHMUCKER, BRAD 163 SE 7TH STREET DEERFIELD BEACH FL <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CLAXON, BRUCE 8703 NW 49TH DRIVE CORAL SPRINGS FL <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BISHOP, GREGORY R 200 SW 75 TERR PLANTATION FL 33317 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SEDLACK, KATHY 5181 NW 64TH DRIVE CORAL SPRINGS FL 33067 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEEMAN, STUART 4888 NW 100 TERRACE CORAL SPRINGS FL 33076 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEMERS, BRIAN 2010 SW 23RD TERRACE FT LAUDERDALE FL 33312 <input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Kathryn Doolin 2171 NW 107 Avenue Sunrise, FL 33322 <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Brad Schmucker 163 SE 7 Street Deerfield Beach, FL 3 <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T David Muri 2355 NW 110 Terrace Sunrise, FL 33322 <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Janet Slayton 1500 NE 40 Place Oakland Park FL 33334 <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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: Katherine Schnell DATE 3/27/01 DAYTIME PHONE # 954-572-0508  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/00)