

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 31, 2002 8:00 am
Secretary of State

0042763

DOCUMENT # N36996

1. Entity Name

**AMERICAN FEDERATION OF MUSICIANS TAMPA BAY, LOCA
 L 427-721, INC.**

03-31-2002 90331 012 ****70.00

Principal Place of Business

Mailing Address

5175 ULMERTON ROAD
 STE. A
 CLEARWATER FL 33760
 US

P.O. BOX 12333
 ST. PETERSBURG FL 33733
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-0371362

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**O'CONNOR PAUL R.
 4388-50TH PLACE SOUTH
 ST. PETERSBURG FL 33711**

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.

SIGNATURE

Paul R. O'Connor

Paul R. O'Connor sec/Treas

March 18, 2002

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
 NAME **VD**
 STREET ADDRESS **JENNINGS, VANCE**
 CITY-ST-ZIP **6226 SOARING AVE
 TAMPA FL 33617**

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **VANSCHAIK, HAROLD**
 CITY-ST-ZIP **720 51ST AVE. N.
 SAINT PETERSBURG FL 33703**

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **BAWEL, KARL**
 CITY-ST-ZIP **2649 PEACHTREE CIR. E.
 CLEARWATER FL 33761**

TITLE ☐ Delete
 NAME **PD**
 STREET ADDRESS **RICE, CHARLES A.**
 CITY-ST-ZIP **11780 110TH TER N.
 LARGI FL**

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **HENDERSON, JOHN**
 CITY-ST-ZIP **2322 INDIGO DR
 CLEARWATER FL**

TITLE ☐ Delete
 NAME **STD**
 STREET ADDRESS **O'CONNOR, PAUL R**
 CITY-ST-ZIP **4388 50TH PL S.
 ST. PETERSBURG FL**

TITLE ☐ Change ☒ Addition
 NAME **D**
 STREET ADDRESS **MENENDEZ, FRANK**
 CITY-ST-ZIP **17600 BROWN RD
 ODESSA, FL 33556**

TITLE ☐ Change ☒ Addition
 NAME **D**
 STREET ADDRESS **VERDI, JOSEPH**
 CITY-ST-ZIP **1437 GULF TO BAY BLVD STE 2
 CLEARWATER, FL 33755**

TITLE ☐ Change ☒ Addition
 NAME **D**
 STREET ADDRESS **VINAS, ROBERT**
 CITY-ST-ZIP **5230-72ND AVE-N
 PINELLAS PARK, FL 33781**

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 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:

Paul R. O'Connor

Paul R. O'Connor Sec/Treas March 18, 2002

CR2E037 (9/01)