2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N46217

1. Entity Name

THE MANASOTA THEATRE ORGAN SOCIETY, INC.



FILED Mar 09, 2007 8:00 am Secretary of State

03-09-2007 90003 040 ****61.25

(Feorge A. Milburn, Fr. (T) (941) 927-2555

| | | | | | | ILI. | | | | | | |
|---|---|--|---|---------------------------|---|---|--|---------------|--------------------------------|-----------------|-------------------------|--|
| Principal Place of Business % GRACE BAPTIST CHURCH 8000 BEE RIDGE RD. SARASOTA, FL 34241 | | | Mailing Address % GRACE BAPTIST CHURCH 8000 BEE RIDGE RD. SARASOTA, FL 34241 | | | | THE SHEET OF CHIEF CHIEF SHEET SHEET CHIEF | | | | | |
| 2. Principal Place of Business - No P.O. Box # | | | 3. Mailing Address | | | | | | | | | |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | | | 02182007 _{Ci} | hg-NP | CR2E037 (| 12/06) | | |
| City & State | | | City & State | | | | 4. FEI Number 65-029708 | 34 | | | olied For Applicable | |
| Zip Country | | | Zip | Cour | 5. Certificate of Status Desired | | | | \$8.75 Additional Fee Required | | | |
| | 6. Name and Address | of Current Registe | Registered Agent | | | | 7. Name and Address of New Registered Agent | | | | | |
| CHARLES PIERSON 7455 PROCTOR RD SARASOTA, FL 34233 | | | | | 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 | | | | | | | | | | | | |
| | | · | | | | | | | | | | |
| Filling Fee is \$61.25 Due by May 1, 2007 9. Election Campaign Fir Trust Fund Contribution | | | | | | | \$5.00 May Be Added to Fees Make check payable to Florida Department of State | | | | | |
| 10. | OFFICE | RS AND DIRECTO | RS | 11. | | | ADDITIONS/CHANG | ES TO OFFICE | RS AND DIREC | TORS IN | 10 | |
| TITLE | Р | | ☐ Delete | TITLE | | D | · - | | | Change | Addition | |
| NAME | PIERSON, CHARLES | | | | RENDER CHARLES | | | | ~ | | | |
| STREET ADDRESS | 7455 PROCTOR ROAL | D | STRE | | | BENDER, CHARLES ADDRESS 4812 JASPER DR # 207 | | | | | | |
| CITY-ST-ZIP | SARASOTA, FL 3424 | | CITY | | | NEW PORT RICHEY, FL 34652 | | | | | | |
| | | | | | | 70 6 | W/OIC/ IC | 20110/ | | | CT 4 4 199 | |
| TITLE | D | | ☐ Delete | | TITLE 7 | | | | × | ₫ Change | Addition | |
| NAME | MILBURN, GEORGE | | | NAME | | | | | | | | |
| STREET ADDRESS | 4843 WINTERHAVEN | | 1 | | EET ADDRESS | | | | | | | |
| CITY-ST-ZIP | SARASOTA, FL 3423 | 3 | | CITY- | ST-ZIP | | | | | | | |
| TITLE | S | | ☐ Defete | TITLE | | \mathcal{D}_{\cdot} | | | |] Change | Addition | |
| NAME | WEISENBORNE, JAM | ES J | | NAME | | ALE | TIGER | MAKY | _ | | | |
| STREET ADDRESS | 7459 CABBAGE PALN | ACT. | | STREE | T ADDRESS | 195 | TIGER | LILLY | DR | | | |
| CITY-ST-ZIP | SARASOTA, FL 3424 | 17114 | | CITY- | ST-ZIP | PAI | RRISH, FO | 4 3421 | 9 | | | |
| TITLE | D | | ☐ Delete | TITLE | | | | | Г | Change | Addition | |
| NAME | FISCHER, JOHN | | | NAME | | | | | _ | | | |
| STREET ADDRESS | 7459 CABBAGE PALM | 1 CT | | STREE | T ADDRESS | 1 | | | | | | |
| CITY-ST-ZIP | SARASOTA, FL 3424 | | | | ST-ZIP | | | | | | | |
| TITLE | VP | <u>. </u> | ☐ Delete | TITLE | | | | | | Change | Addition | |
| NAME | PORFIDIO, THOMAS | | - Delete | NAME | | ļ | | | L | 1 Change | L Addition | |
| STREET ADDRESS | 1808 SAN TROVASO | WAV | | 1 | T ADDRESS | 1 | | | | | | |
| CITY-ST-ZIP | VENICE, FL 34292 | **** | | | ST-ZIP | | | | | | | |
| | | | | - | • | <u> </u> | | · | | 7.05- | | |
| TITLE | D A STANK A STANK B | | ☐ Delete | TITLE | | | | | L |] Change | ☐ Addition | |
| NAME | NORMAN ARNOLD | | | NAME | T ADDRESS | | | | | | | |
| STREET ADDRESS | 8261 COASH RD | 10040 | | | | ! | | | | | | |
| CITY-ST-ZIP | SARASOTA, FL 3424 | 19349 | | CITY- | ST-ZIP | | | | | | | |
| indicated of the cor | certify that the information s on this report or suppleme poration or the receiver or t , or on an attachment with a | ntal report is true a trustee empowered | nd accurate and that r to execute this report | my signati : as requir | ure shali h | nave the | same legal effect as | if made under | oath; that I am | an officer | or director | |