

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004817

FILED
Apr 12, 2004
Secretary of State

Entity Name: SOULSPEAK/SARASOTA POETRY THEATRE, INC.

Current Principal Place of Business:

535 COLUMBIA CT
SARASOTA, FL 34236 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 48955
SARASOTA, FL 342306955 US

New Mailing Address:

FEI Number: 65-0457672 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPRING, JUSTIN
1620 BOATHOUSE CIRCLE, G-201
SARASOTA, FL 34231 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GORHAM, DEBRA
Address: 241 SUNTAN AVE.
City-St-Zip: SARASOTA, FL 34237

Title: VD () Delete
Name: BECICH, TONY
Address: 1105 4TH STREET WEST
City-St-Zip: BRADENTON, FL 34221

Title: D () Delete
Name: O'DONNELL, CYNTHIA
Address: 2330 MIETAW DR.
City-St-Zip: SARASOTA, FL 34239

Title: PD () Delete
Name: WACHSMAN, E
Address: 5521 CALLE DEL VERANO
City-St-Zip: SARASOTA, FL 34242

Title: TD () Delete
Name: MC COLM, JAMES
Address: 637 WHITE PINE TRAIL RD
City-St-Zip: VENICE, FL 34292

Title: SD (X) Delete
Name: TREMAIN, SHARON
Address: 405 SEVILLE ST.
City-St-Zip: NORTH PORT, FL 34287

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WILLS, SUSAN
Address: 722 SOUTH BOULEVARD OF PRESIDENTS
City-St-Zip: SARASOTA, FL 34236

Title: TD (X) Change () Addition
Name: BECICH, TONY
Address: 1105 4TH STREET WEST
City-St-Zip: BRADENTON, FL 34221

Title: VD (X) Change () Addition
Name: WATKINS, ALISON
Address: 4774 HOXIE LANE
City-St-Zip: SARASOTA, FL 34233

Title: PD (X) Change () Addition
Name: WACHSMAN, ERIC
Address: 5521 CALLE DEL VERANO
City-St-Zip: SARASOTA, FL 34242

Title: SD (X) Change () Addition
Name: WATERS, TONIE
Address: 144 ADAIR AVENUE
City-St-Zip: SARASOTA, FL 34243

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TONY BECICH

TD

04/12/2004

Electronic Signature of Signing Officer or Director

_____ Date