

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N93000004817

FILED  
Apr 03, 2003  
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: LISCOMBE, SCYLLA  
Address: 535 COLUMBIA COURT  
City-St-Zip: SARASOTA, FL

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

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

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

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: ERIC WACHSMAN

D

04/03/2003

Electronic Signature of Signing Officer or Director

Date