

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005604

FILED  
May 09, 2010  
Secretary of State

**Entity Name:** CZECH-AMERICAN SUMMER MUSIC INSTITUTE, INC.

**Current Principal Place of Business:**

2305 HAMPSHIRE WAY  
TALLAHASSEE, FL 32309

**New Principal Place of Business:**

**Current Mailing Address:**

2305 HAMPSHIRE WAY  
TALLAHASSEE, FL 32309

**New Mailing Address:**

**FEI Number:** 59-3215999      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

KUBIK, LADISLAV  
2305 HAMPSHIRE WAY  
TALLAHASSEE, FL 32309      US

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:** PD  
**Name:** KUBIK, LADISLAV  
**Address:** 2305 HAMPSHIRE WAY  
**City-St-Zip:** TALLAHASSEE, FL 32308

**Title:** VPD  
**Name:** CROFT, J  
**Address:** 1922 SHARON DR  
**City-St-Zip:** TALLAHASSEE, FL 32304

**Title:** D  
**Name:** HUNDLEY, SHAWN  
**Address:** 1200 FLORAL SPRINGS BLVD, UNIT 5208  
**City-St-Zip:** PORT ORANGE, FL 32129

**Title:** D  
**Name:** SOBKOWSKA, JOANNA  
**Address:** 1212 CARSON DRIVE  
**City-St-Zip:** TALLAHASSEE, FL 32301

I hereby 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 all other like empowered.

SIGNATURE: LADISLAV KUBIK

PROF

05/09/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date