2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **N94000002285**

1. Entity Name

THE MOSTLY POPS ORCHESTRA OF FLORIDA, INC.



FILED Mar 07, 2003 8:00 am Secretary of State

03-07-2003 90143 010 ****61.25

i iliopai i iao	e of Business	Mailing Address							
502 DEBIIE JOY PLACE BRANDON FL 33511-5818 US		502 DEBBIE JOY PLACE BRANDON FL 33511-5618 US				61941 6541 6541 6611	(. B 844) 88 44 6 11		41 b 114 1 84 1
2. Principal P	lace of Business	3. Mailing Address							
'						13 010 66 40 141 50 111 0011	11 68 111 88 11 8 11	1818 (1881 181	E1 4151 1681
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES					
City & State		City & State			4. FEI Number 59-3259861			Applied For Not Applicable	
Zip	Country	Zip	Country		5. Certificate of Sta	atus Desired		.75 Add	itional
	6. Name and Address of Current	Registered Agent	- ·- <u> </u>		7. Name and Add	ress of New Regi			
			Name)					
MCCALL, MAUDINE D. 502 DEBBIE JOY PLACE			Street Address		(P.O. Box Number is Not Acceptable)				
BRANDON FL 33511									
•			City				FL	Zip Code	,
	named entity submits this statement fo	r the purpose of changing its	registered office	or register	ed agent, or both, in t	the State of Florida	a. I am fam	iliar with, a	and accept
the obligat	ions of registered agent.								
SIGNATURE .									
·	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE	Registered Agent sig	nature required	when reinstating)		DATE		
ï									
•	FILE NOW: FEE IS \$61.25	9. Election Carr Trust Fund C	. •		\$5.00 May Be Added to Fees		Check P Departme		
10.	OFFICERO AND DIE								
	OFFICERS AND DIF	RECTORS	11.	7)	ADDITIONS/CHANGE	S TO OFFICERS	AND DIREC	CTORS IN	10
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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: Mallow WRYNGCOWREMandineD McCall 3/4/03 813-681-2794