FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

N94000005416 (2) DOCUMENT #

THE FLORIDA ORCHESTRA GUILD/TAMPA, INC.

Principal Place of	of Business	Mailing Address	Mailing Address				i ikalisidi Atâ ibili biaşt gât	** ##*** ##***		1891 HEIÐ BHI H	
111 E MADISO	ON ST	111 E MADISON ST									
STE 2400		STE 2400 TAMPA FL 33602									
TAMPA FL 33602 US		US			3	. Date Incorporated or Quali 10/28/1994	ified 3a. Date of Last Report 05/01/1995				
2. Principal Pla	ce of Business	2a. Mailing Address				4	. FEI Number			Applied Fo	
21		26					59-1223691			Not Applica	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5	. Certificate of Status Desire	d [\$8.75 Additional Fee Required			
City & State		City & State			6	. Election Campaign Financi	ng _	\$5.00 May Be			
23		28					Trust Fund Contribution		Add	led to Fees	
Zip	Country	Zip		Country		8	. This corporation has liabilit	y for intang	jible tax under es IXI No	s. 199.032,	
24	25	29	30		 -		Florida Statutes Name and Address of N				
	9. Name and Address of Curren	t Hegistered Agent		81	Name	- 10	, Name una Addition of the				
								L (- X			
EICHOLTZ, KIRK D				82 Street Address (P.O. Box Number is Not Acceptable) 111 E. Madison Street							
	ADISON ST		83								
SUITE 30		Suite			e 240	00			The Oracle		
IAMPA I	FL 33602			84	City Tamp	18			FL 85	Zip Code 33602	
11 Purcuant to	o the provisions of Sections 617.0502	and 617,1508. Florida Statut	es, the	above-		reporation	submits this statement for the	ne purpose	of changing it	s registered	office
or registers	o the provisions of Sections 617.0502 ed agent, or both, in the State of Flori h, and accept the obligations of, Sect	aa. Such change was autriorz	'ea by i	the corp	oration's l	board of	directors. I hereby accept the	e appointm	ent as register	ed agent. I a	(I)
tamiliar wit	n, and accept the obligations of, Sect	ion 617.0003, Florida Statutes	э.								
SIGNATURE _	Signature, typed or printed name of registered agont	and tide if applicable (NC	OTE: Reg	tered Age	nt signature re	equired wher:	reinstating)		DATE		
12.		D DIRECTORS		13.			ADDITIONS/CHANGES TO	O OFFICER			
1+1LE	DP	▼ DELETE		1.1 THILE					☐ Chang	e 🔲 Addi	lion
NAME	LAWRENCE, PATTI C		1	1.2 NAME							
STREET ADDRESS	4831 LONGWATER WAY			13 STREE	T ADDRESS						
CITY-ST-ZIP	TAMPA FL 33615			1.4 CITY-:	ST-ZIP	ļ			(T) Ohana	e 🔲 Addi	tion
TITLE	DV	DELETE		2.1 TITLE		DP	- F1-4 1		X Chang	le [] Muu	UUII
NAME	stupp, elaine l			2 2 NAME			p, Elaine L				
STREET ADDRESS	1040 S STERLING AVE				T ADDRÉSS		S. Sterling A	ve.			
CITY-ST-ZIP	TAMPA FL 33629	franci ere	_	2 4 CITY-	ST - ZIP	Tamp	a, FL 33629		Chang	je 🔲 Addi	ition
TITLE	D	(X) D£LETE		3 F TITLE					on any	,- <u>[</u>],,,,,,	
NAME	DEROOS O'CONNOR, HERN	IANUA		3.2 NAME							
STREET ADDRESS	4920 ANDROS DR				T ADDRESS						
CITY-ST-ZIP	TAMPA FL 33629	DELETE		3 4. CITY -		 			Chang	ge 🔲 Add	ilion
TITLE	ST CHIDLEY			4.1 MILE						_	
NAME	FITZGERALD, SHIRLEY				ET ADDRESS						
STREET ADDRESS	4822 CHEVAL BLVD			4.4 CITY-		1					
CITY-ST-ZIP	LUTZ FL 33549	DELETE		5.1 TITLE		DV			Chan	ge 🔀 Add	ition
TITLE			1	5.2 NAME			za, Connie				
NAME STREET ADDRESS					ET ADDRESS		Highland Park	Circl	Le		
1			1	5 4 CITY-			, FL 33549				
CITY-ST-ZIP		DELETE	<u> </u>	61 TITLE		D			Chan	ge 🙀 Add	ition
NAME				6 2 NAME		Snvd	ler, Eileen				
STREET ADDRESS					ET ADDRESS		2 Avenue Monac	0			
			ĺ	64 CITY.	. ST - 7IP	Lutz	. FI. 33549				
	l by certify that the information supplied	with this filing is voluntarily full	rnished	l and do	ac not au	alify for th	a exemption stated in Section	on 119.07(3	3)(k), Florida St	atutes. I furth	ner nder
certify that	at the information indicated on this and	nual report or supplemental an loration or the receiver or trust	muai re tee emi	powered powered	rue and ad d to execu	iccurate al ite this rep	port as required by Chapter	617, Florida	a Statutes; and	that my nar	ne
appears i	n Block 12 or Block 13 if changed, or	on an attachment with an add	dress.								

SIGNATURE:

Elaine L Stuff SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SURVECTOR

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