

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N95000003179

FILED
May 01, 2002 8:00 AM
Secretary of State

Entity Name: THE FLORIDA VOICES ENSEMBLE, INC.

Current Principal Place of Business:

805 PENN WAY
SARASOTA, FL 34243

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 15382
SARASOTA, FL 342771382 US

New Mailing Address:

FEI Number: 65-0606291

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JENSEN, DALE K
805 PENN. WAY
SARASOTA, FL 34243

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: PD () Delete
Name: ROWLAND, MICHAEL
Address: 2216 BAHIA VISTA ST. #H-8
City-St-Zip: SARASOTA, FL 34239

Title: VD () Delete
Name: O'CONNOR, TIM
Address: 466 PALM TREE DRIE
City-St-Zip: BRADENTON, FL 34210

Title: DV () Delete
Name: JENSEN, DALE
Address: 805 PENN. WAY
City-St-Zip: SARASOTA, FL 34243

Title: ST () Delete
Name: RAINES, SUSAN
Address: 5211 11TH AVENUE WEST
City-St-Zip: BRADENTON, FL 34209

Title: SD () Delete
Name: FILSON, SUSAN
Address: 1522 EASTBROOK DRIVE
City-St-Zip: SARASOTA, FL

Title: D () Delete
Name: TREZISE, MICHAEL
Address: 8452 GARDENS CIRCLE #10
City-St-Zip: SARASOTA, FL 34243

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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City-St-Zip:

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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: SUSAN RAINES

ST

05/01/2002

Electronic Signature of Signing Officer or Director

Date