

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N95000004686

1. Entity Name
CLASSICAL GUITAR SOCIETY OF TALLAHASSEE, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 JUL -2 PM 12:20

Principal Place of Business
326 MEADOW RIDGE DR.
TALLAHASSEE, FL 32312

Mailing Address
326 MEADOW RIDGE DR.
TALLAHASSEE, FL 32312



06292004 No Chg-NP CR2E037 (10/03)

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4. FEI Number
59-3345412

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ATKINSON, TIMOTHY P
301 S BRONOUGH STREET 5TH FLOOR
TALLAHASSEE, FL 32301

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

**Filing Fee is \$61.25
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV HOGE, DAVID 1833 HALSTEAD BLVD., #401 TALLAHASSEE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ATKINSON, TIMOTHY P 326 MEADOW RIDGE DR TALLAHASSEE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS SPAINHOUR, MYRON 5603 PEDRICK PLANTATION CIR. TALLAHASSEE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOLZMAN, BRUCE 4442 SWEETLEAF LANE TALLAHASSEE, FL 32303
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EGGERS, JR., RICK 2208 EASTGATE WAY TALLAHASSEE, FL 32308
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT CLOSSON, RANDY 1781 RODEO DRIVE TALLAHASSEE, FL 32311

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07/12/04--01047--003 **61.25

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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: TIMOTHY P ATKINSON 7-2-2004 521-0700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #